



Judicial Branch of Maricopa County

PROJECT INITIATION/BUSINESS PROCESS & REQUIREMENTS DOCUMENT FOR:

EHR PROJECT

ELECTRONIC HEALTH RECORDS FOR JUVENILE DETENTION CLINIC

PREPARED BY: CTS PROJECT MANAGEMENT OFFICE

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| 10/13/2010 | Ervin Merkuri | 0.26 | Added process diagrams and descriptions pertaining to the Continuity of Care Services (Clinic-Detention Center Continuity of Care process, Clinic-Guardian Continuity of Care process and Request Continuity of Care Records process). Added process diagrams and descriptions pertaining to the Utilization Review Services (overall process, ER Visits Non-Admitted Patient process, ER Visits Inpatient process, CHS Monthly Reporting And Reimbursement process). Updated the Continuity Of Care Sub-Specialty Visits process to incorporate the new information pertaining to Utilization Review services. Added the To-Be Pre –Vaccination Administration Process Flow Diagram. |
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| 10/28/2010 | Ervin Merkuri | 0.29 | Added high level requirements 19 and 20. Added the to-be process flow diagrams for the Referrals process (ER Referrals, Sub-Specialty Appointments, Continuity Of Care Sub-Specialty Visits, Release Of Medical Information, Crisis Referral, Dietary Referral, Provider Initiated Referral). Added the to-be process flow diagrams for the Laboratory Services process (Laboratory Services—Sonora, Laboratory Services—Public Health Department). Added the to-be process flow diagram for the Reports process. |
| 10/29/2010 | Ervin Merkuri | 0.3 | Added the to-be process flow diagrams for the Continuity Of Care Services |

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| | | | <p>(ADJC /CPF Transfer, Clinic-Detention Center Coordination Of Care, Clinic-Guardian Coordination Of Care, Request Continuity Of Care Records).</p> <p>Added the to-be process flow diagrams for the Utilization Review Services (ER Visits Non-Admitted Patient, ER Visits Inpatient, CHS Monthly Reporting And Reimbursement).</p> <p>Added the to-be process flow diagrams for the Quality Assurance Services (Documentation Review, Safety And Security, Training).</p> <p>Updated the Medical Services Clinic Overall Process Flow Diagram to include the following processes: Reports, Immunization Services, Continuity Of Care Services, Utilization Review Services, Quality Assurance Services.</p> |
| 11/04/2010 | Ervin Merkuri | 0.31 | <p>Updated the Continuity Of Care Services, Utilization Review Services, and Quality Assurance Services process flows and descriptions, as per the 11/03 feedback from Dr. Chantay Banikarim.</p> <p>Added the Counseling and Psychological Services Clinic Overall Process Flow Diagram.</p> <p>Added the process description and the as-is process flow diagram for the Mental Health Screening process.</p> <p>Added high level requirement 21—specific to the DCPS Clinic.</p> |
| 11/05/2010 | Ervin Merkuri | 0.4 | <p>Added process diagrams and descriptions pertaining to the Mental Health Counseling process, Therapeutic Group process, Crisis Session process, Discharge Note process, Court Ordered Evaluation process (Evaluation and Notification, External Referral).</p> |

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1 PURPOSE OF THIS DOCUMENT

This document contains project initiation, business process definition, and requirements necessary to support the conceptual design and development of the identified functionality.

2 PROJECT OVERVIEW

2.1 BACKGROUND

The Detention staffs provide a safe and secure living place for juveniles who must be detained to help maintain the safety of the community. They also lead educational and counseling sessions to give detained juveniles the tools they need to act as good citizens when they are released from detention.

There are two detention centers, the **Durango Facility in Phoenix** and the **South East Facility in Mesa**. Each center has a team of officers that screens every juvenile brought to detention to determine whether or not the juvenile should be kept in detention. If a juvenile does not need to be detained, the screening team returns him to his parent or legal guardian who is responsible for him. The screeners are on duty 24 hours a day 7 days a week. At each detention center there is a team of transportation officers, who accompany every juvenile who has to leave detention for court hearings, doctors' appointments, etc. and ensure that they are returned safely to detention.

Arizona requires each county to operate a detention center for juveniles who:

- Are likely to commit an offense injurious to self or others
- Need custodial protection for their own interests or the interests of the public
- May be charged as adults for a serious offense
- Would not appear for a court hearing if they were not detained, or
- Must be held for another jurisdiction

The **Juvenile Probation Department's mission** is to provide access to evidence-based early intervention, supervision, treatment and secure care for youth and families so that youth learn accountability and responsibility, and community safety is enhanced.

We want to have a detention center that protects the public from juveniles who are dangerous to themselves and the community, and to give those juveniles the tools they will need to become responsible citizens when they are released from detention.

While in detention, Juveniles are provided with the necessary health services by the Juvenile Detention Medical Services clinic and the Juvenile Detention Counseling and Psychological Services clinic. Both clinics are located inside the Detention Facility and operate offices in each detention center, the **Durango Facility in Phoenix** and the **South East Facility in Mesa**.

The mission of the Clinics is to provide for the health and well being of juveniles detained at the facilities . When specialized medical services are needed, referrals to outside providers are made by the clinics' physicians, and the clinics personnel coordinates with the Detention Center staff in providing Juveniles with such services.

2.2 PURPOSE

The purpose of this project is to:

- Install and implement an electronic health records management system which provides a complete record of patient encounters, including eprescribe, and permits automation and streamlined workflow in the health care setting.
- Increase safety through evidence-based decision support, quality management, and outcomes reporting.
- Capture and manage scanned clinical and administrative documents from various sources to support this process.

2.3 SCOPE

The following functions and areas are considered in scope for this project:

- All Juvenile health & mental health records for juveniles housed and/or processed at the Juvenile Detention Facilities Clinics
- Identification and acquisition of hardware and software necessary to support the Juvenile Detention Facilities Clinic's requirements

The following functions and areas are not considered in the scope of this project:

- Data conversion of existing medical records
- Implementation of all policies, procedures, and functions within this fiscal year (FY 2010)

3 OBJECTIVES

Objective 1. Identification of a COTS or other software application that meets the Juvenile Detention Facility's Clinic's requirements

- Outcome 1. Application selection and preparation for implementation.

Objective 2. Implementation and Deployment of the new application at the Juvenile Detention Clinic

- Outcome 1. Ability to create, update, and access juvenile medical records in a secure and controlled environment.
- Outcome 2. Meet the medical needs of juveniles housed by or processed through the juvenile detention clinics.
- Outcome 3. Direct linkage between reports in the medical record x-ray reports, procedure reports, pathology reports, narrative reports, communication, and associated images
- Outcome 4. Improved continuity of care because clinicians have access to all images and records during the patient visits, including images captured and residing at other locations
- Outcome 5. Ability to use eprescribe via the electronic medication system.
- Outcome 6. Improved image interpretation through manipulation of digital images
- Outcome 7. Remote image interpretation allows consultation by specialty clinicians located at other locations
- Outcome 8. Reduced patient travel through remote consultation
- Outcome 9. Reduced patient waiting times and improved customer service
- Outcome 10. Fewer repeat procedures due to lost film
- Outcome 11. Reduced operational expenses

4 ORGANIZATIONS / BUSINESS UNITS AFFECTED, STAKEHOLDERS

The organizations and their stakeholders include:

- Juvenile Detention Clinic (both medical & mental health)
- Juvenile Detention
- Court Technology Services

5 RISKS & ASSUMPTIONS

5.1 RISKS

| | Risk Description | Response Plan | Probability | Impact | Scope |
|----|--|---|-------------|--|-------------------------|
| 1. | Hiring Freeze, Resource Availability | Apply contracted resources to complete | 100% | Slow project progress, delay of delivery | All |
| 2. | Competing projects; resources getting diverted | IT Governance | 100% | Slow project progress, delay in delivery | CTS |
| 3. | Limited Time – Desire to utilize funds available in this fiscal year | Prioritization of project within current workload | 100% | Inability to apply current Fiscal Budget that is available. | Juvenile Detention, CTS |
| 4. | Limited Analysis Time and Limited Stakeholder Participation—Business processes, 53 overall, were captured within 288 hours, utilizing the input received from only one representative per clinic during one-on-one sessions. | N/A | 100% | Some of the business processes identified may need to undergo a second iteration and be refined further. | Juvenile Detention, CTS |

5.2 ASSUMPTIONS

1. There are existing COTS available in the market that will meet the needs with no or minimal modification.
2. There are existing publicly available products that will meet the needs with no or minimal modification.
3. Hardware acquisition can be accomplished in the necessary time frame to meet current fiscal year funding.
4. Selected product vendor or public organization will provide support for implementation.
5. Of the Juvenile records maintained in other systems, the records pertinent to the clinics' operations will need to be loaded into the application system.
6. No method or mechanism is identified, defined, or designed for the initial loading of existing juvenile medical record data.

6 PROJECT FUNDING INFORMATION, STATUS AND STRUCTURE

Currently identified as a Level 1/Priority 1 project for the Juvenile Detention Facility Clinics. FY 2010 funding may be used for acquisition of hardware and software.

The project structure follows:

| | |
|----------------------------------|---|
| Project Sponsor(s): | Debra Hall Deputy Chief – Detention Service Juvenile Probation Department |
| Business Process Owners: | Dr. Chantay Banikarim Juvenile Detention Medical Director |
| | Dr. Marina Lantsman-Waugh, PhD, Clinical Director, Detention Counseling & Psychological Services |
| Court Technology Services | Ken Troxel Applications Development Director CTS |
| | Kevin Westover Enterprise Infrastructure Director CTS |
| CTS Business Analysis: | Bill Miller Manager of Business Analysis CTS |

Sections 1 through 6 provide general information on the project initiation and management.

Sections 8 through 10 depict and describe the proposed processes specific to the area under analysis.

Section 8 provides a context for the overall area of analysis.

Section 9 groups the Medical Services clinic operations by functional areas. Each functional area is then decomposed by the processes involved, and each processes is detailed via the activities performed and the interactions carried out by the participating entities (staff, application systems, and external entities).

For each process identified, the following information is presented:

- Triggering Events/Actions – what causes this process to be executed;
- Involved Entities – what functional areas (people & organizations) and application systems are utilize this process;
- Pre-conditions – what conditions must exist for this process to be performed;
- Inputs – what data or information is utilized to perform the process;
- Description – what actions/steps are performed;
- Business Rules – what, if any, specific rules govern what occurs in this process;
- Calculations – what, if any, calculations need to be performed during this process;
- Outputs – what results from this process being performed;
- Post-conditions - What, if any, static information or condition

Process flow diagrams (created in Tibco Business Studio) are included as part of each and every identified business process.

- As-Is Process Flow Diagrams – describe the process flows as they are presently carried out in the clinics
 - Generic functions only, such as "Bring Up Screen", etc. are used to capture the users' interaction with external systems.
- To-Be Process Flow Diagrams – describe the process flows as they could (potentially) be carried out in the presence of an electronic health records system
 - The EHR system is treated as a black box in all to-be process flow diagrams
 - Utility functions, such as "Log in", "Log out", etc. are omitted in most of the to-be flow diagrams
 - Generic functions, such as "Bring Up Screen", "Redirect", "Retrieve Data", "Persist Data", "Send Notification/Alert", etc. could be used to capture the system's interaction with the users and other systems, as well as the inner workings of the system
 - The tasks carried out by the system are not shown specifically in the to-be flows. It is up to the reader to infer which specific task is performed by the system at any particular point during the process.
- The following naming convention is used for the process flow titles:
 - C As-Is Pxxx (for the Medical Services Clinic current processes)
 - C To-Be Pxxx (for the Medical Services Clinic processes in the presence of the EHR system)
 - P As-Is Pxxx (for the Counseling and Psychological Services Clinic current processes)

- P To-Be Pxxx (for the Counseling and Psychological Services Clinic processes in the presence of the EHR system)
- The following naming convention is used for the title of the inputs/outputs used/produced during a process:
 - the phrase (*Manual*) precedes the title when the activity which uses/produces the input/output does not involve the use of software system(s)
 - no prefix is used for the title when the activity which uses/produces the input/output involves the use of software system(s)
- For readability purposes, not all inputs/outputs related to a process are included as artifacts in the process flow diagrams
 - refer to the process descriptions for the complete lists of the inputs/outputs related to a process
- The following Tibco Business Studio conventions have been used regarding the user's tasks:
 - A computer screen behind the user's icon represents a task performed by the user using a software application
 - A stack of folders behind the user's icon represents a task performed by the user manually

In the same fashion, **Sections 10** describes the operations of the Counseling and Psychological Services clinic.

Section 11 presents the high level business requirements (features) for the delivery of an Electronic Medical Records (EMR) solution for the Juvenile Detention Clinics. When appropriate, specific references are made to the more detailed set of requirements being addressed by a high level feature.

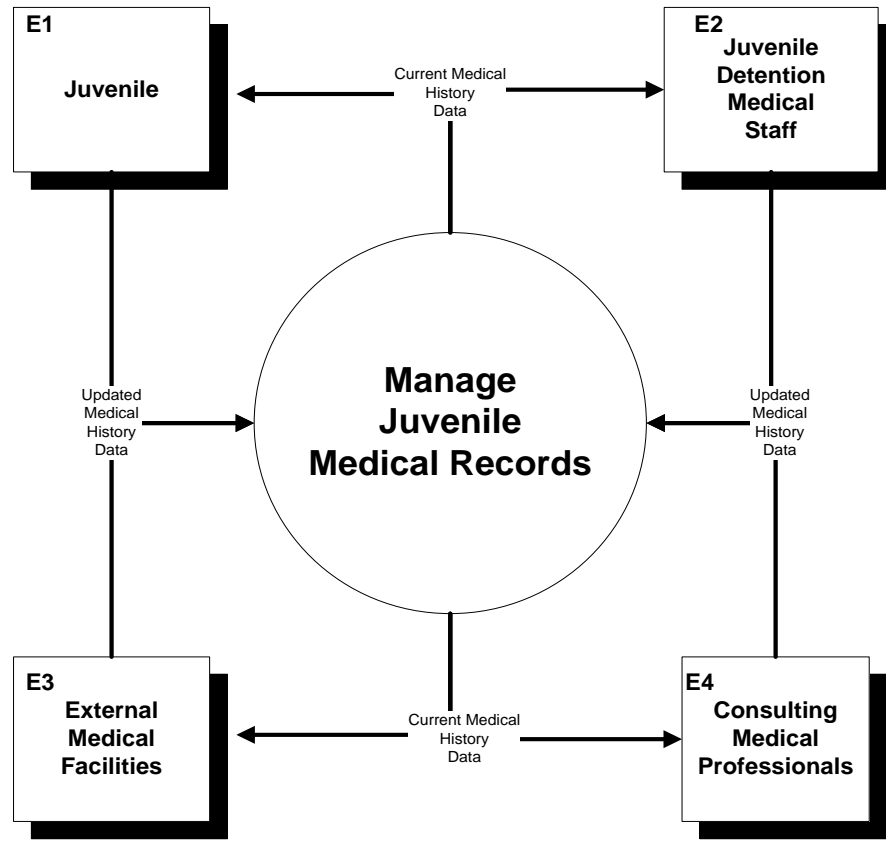
Section 12 includes the appendixes used for this document.

8 PROJECT CONTEXT

8.1 MANAGE JUVENILE MEDICAL RECORDS

- **Triggering Events/Actions**
 - Juvenile is detained at Juvenile Detention Facility
- **Involved Entities**
 - Juvenile
 - Juvenile Detention Medical Staff
 - External Medical Facilities
 - Consulting Medical Professionals
- **Pre-conditions**
 - Juvenile is “in custody”
- **Inputs**
 - Juveniles Currently in Detention Report (iCIS)
 - Medical History Data
 - Medical Service Performed Data
 - Medical Diagnostics Data
- **Description**
 - This process maintains juvenile medical records
- **Business Rules**
 - All juvenile information access restrictions are enforced pursuant to Arizona Revised Statute, Judicial Branch Rules of the Court, and Administrative Orders;
 - All medical Health Insurance Portability and Accountability Act (HIPAA) regulations are enforced;
- **Calculations** – NONE;
- **Outputs** – Juvenile medical profile and history (updated)
- **Post-conditions**
 - Updated Juvenile Medical Records
 - Updated Juvenile Medical Profile in iCIS

Figure 1: P0 "The Electronic Health Records Project Context"



There are nine (9) major functions performed by the Juvenile Detention Medical Services Clinic. Those are:

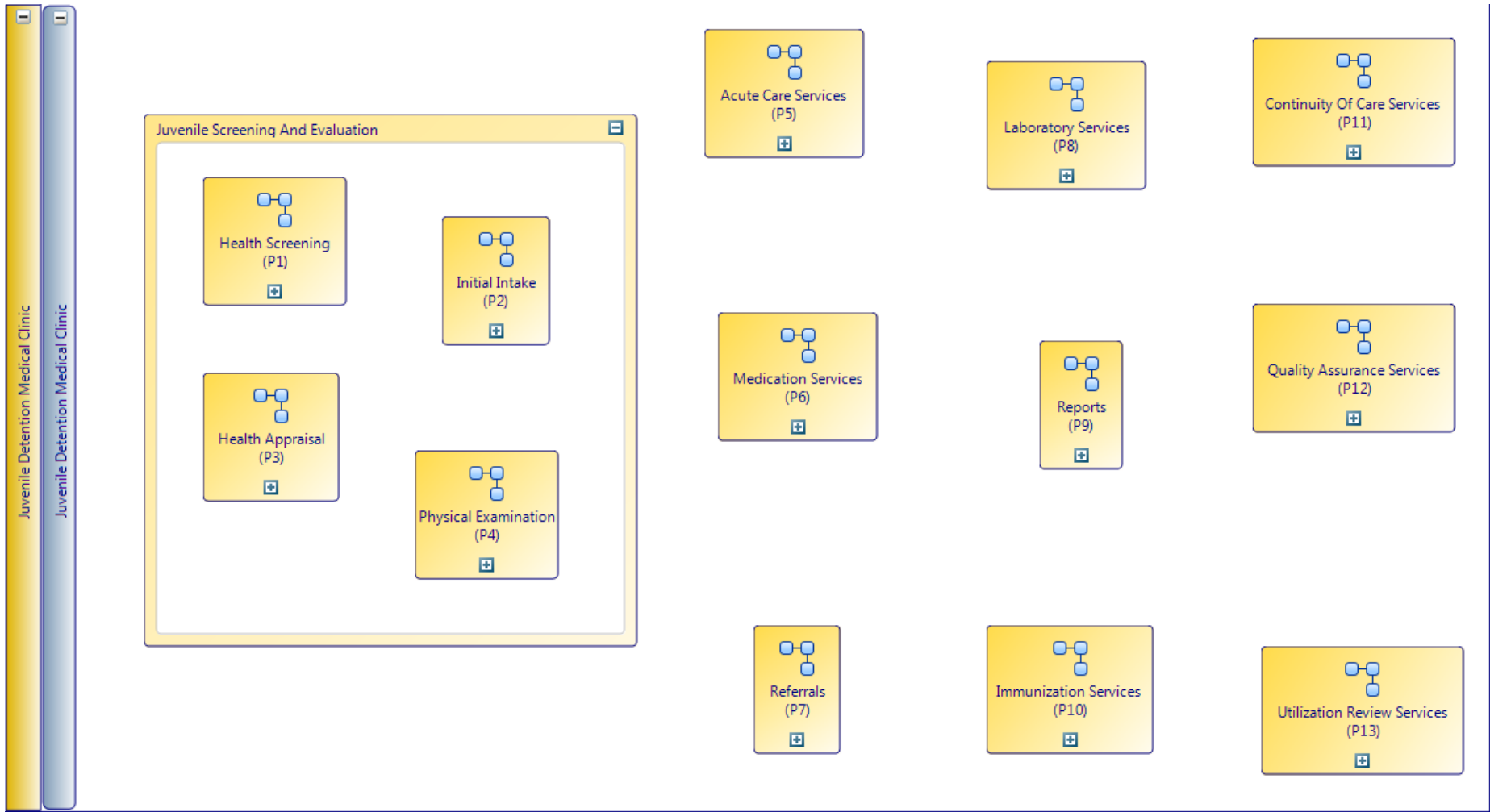
- **Juvenile Screening and Evaluation (P1 – P4)** – All juveniles detained at the Juvenile Detention facilities receive 4 standard medical evaluations based on the initial length of detention. These are:
 - At arrival – Health Screening
 - 24 hours of intake – Nurse Intake
 - 3 days – Health Appraisal
 - 7 days – Physical Examination
- **Acute Care Services (P5)**
- **Medication Services (P6)**
- **Referrals (P7)**
- **Laboratory Services (P8)**
- **Reports (P9)**
- **Immunization Services (P10)**
- **Continuity of Care Services (P11)**
- **Quality Assurance Services (P12)**
- **Utilization Review Services (P13)**

Currently, the bulk of the clinical operations are performed manually, with the Courts' iCIS system being leveraged for less than 10% of the operations performed by the Medical Services clinic.

Figure 2 gives an overview of the 9 major functions (13 processes) listed above.

Sections 10.1 through 10.13 provide detail on each and every functional area listed above.

Figure 2: As-Is PQC " Medical Services Clinic Overall Process Diagram"



9.1 C P1 - HEALTH SCREENING

- **Triggering Events/Actions**
 - Juvenile is received at Juvenile Detention Facility
- **Involved Entities**
 - Juvenile
 - Juvenile Detention Assessment Center Staff (JDAC)
 - Juvenile Detention Clinic RN
 - Juvenile Detention Clinic Provider
 - Emergency Room
 - Paramedics
 - iCIS
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Emergency Room
 - Paramedics
 - Evaluate Health Complaints
 - Nurse Intake
- **Pre-conditions** – NONE
- **Inputs**
 - JDAC Screening - BLANK
 - iCIS Review List
 - Juvenile Active Chart
 - Juvenile Interview
 - JDAC Staff Observations
 - Any other inputs, not listed above, pertaining to any of the following sub-processes:
 - Emergency Room
 - Paramedics
 - Evaluate Health Complaints
 - Nurse Intake
- **Description**
 - During this process, the Juvenile Detention Assessment Clinic staff performs an initial review of the juvenile in order to identify any urgent medical needs.
- **Business Rules**
 - Must be performed upon the juvenile's arrival to the detention center.
- **Calculations** – NONE
- **Outputs**
 - JDAC Screening Form
 - COMPLETED - when no additional notes are added from the RN to the RN section of the form
 - UPDATED - when additional notes are added from an RN to the RN section of the form
 - iCIS Review List - UPDATED
 - Any other outputs, not listed above, pertaining to any of the following sub-processes:

- Emergency Room
 - Paramedics
 - Evaluate Health Complaints
 - Nurse Intake
- **Post-conditions**
 - Juvenile placed in general population, or treated accordingly in case of urgent medical needs.

Figure 3: C As-Is P1 “Health Screening Process Diagram”

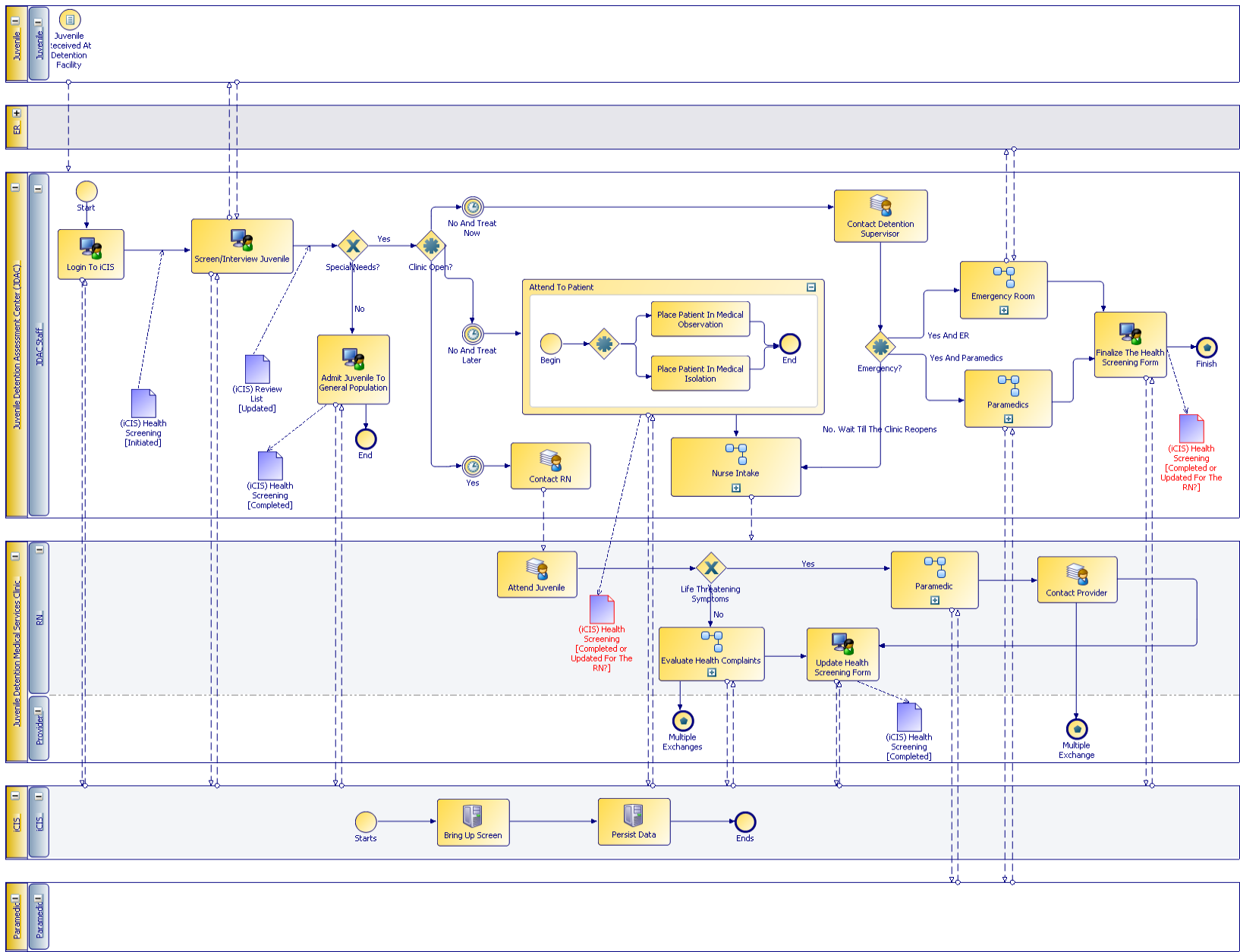
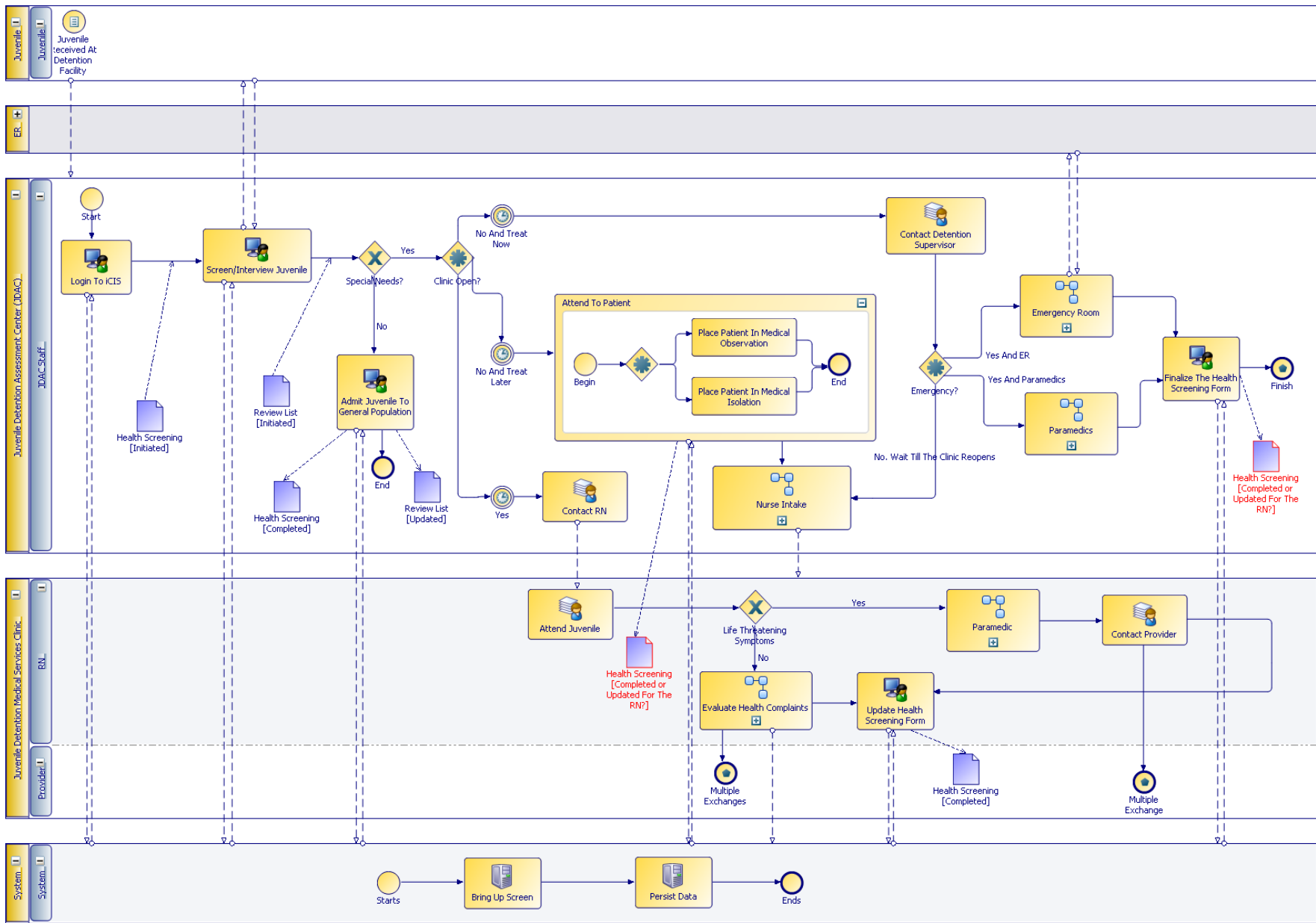


Figure 4: C To-Be P1 “Health Screening Process Diagram”



- **Triggering Events/Actions**
 - Juvenile is detained at Juvenile Detention Facility
- **Involved Entities**
 - Juvenile
 - Juvenile Detention Facility
 - Juvenile Detention Clinic RN
 - Juvenile Detention Clinic Provider
 - Juvenile Detention Clinic Secretary
 - Juvenile's Parent/Guardian
 - iCIS
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Evaluate Health Complaints
- **Pre-conditions**
 - Health screening is completed
 - Juvenile is “in custody”
- **Inputs**
 - Health Screening
 - iCIS 24 Hour Review List
 - Juvenile Active Chart
 - Juvenile Interview
 - Nurse Observation
 - Medical Records Obtained From Parent/Guardian
 - Nurse Intake Form - BLANK capturing
 - Medical History Data
 - Current Medical Condition
 - Any other inputs, not listed above, pertaining to any of the following sub-processes:
 - Evaluate Health Complaints
- **Description**
 - During this process, the Clinic RN interviews the juvenile and gathers medical history and current medical information from the juvenile
- **Business Rules**
 - Must be performed within the 1st twenty-four (24) hours of detainment.
 - If Juvenile is unavailable, the initial intake may be performed the next day.
- **Calculations – NONE;**
- **Outputs**
 - Nurse Intake Form - COMPLETED capturing
 - Medical History Data
 - Current Medical Condition
 - Juvenile Chart—Created/Updated
 - Juvenile medical profile and history (updated) in iCIS

- Access To Care Form Completed
 - Any other outputs, not listed above, pertaining to any of the following sub-processes:
 - Evaluate Health Complaints
- **Post-conditions**
 - Updated Juvenile Medical History
 - Juvenile placed in general population

Figure 5: C As-Is P2 "Nurse Intake Process Diagram"

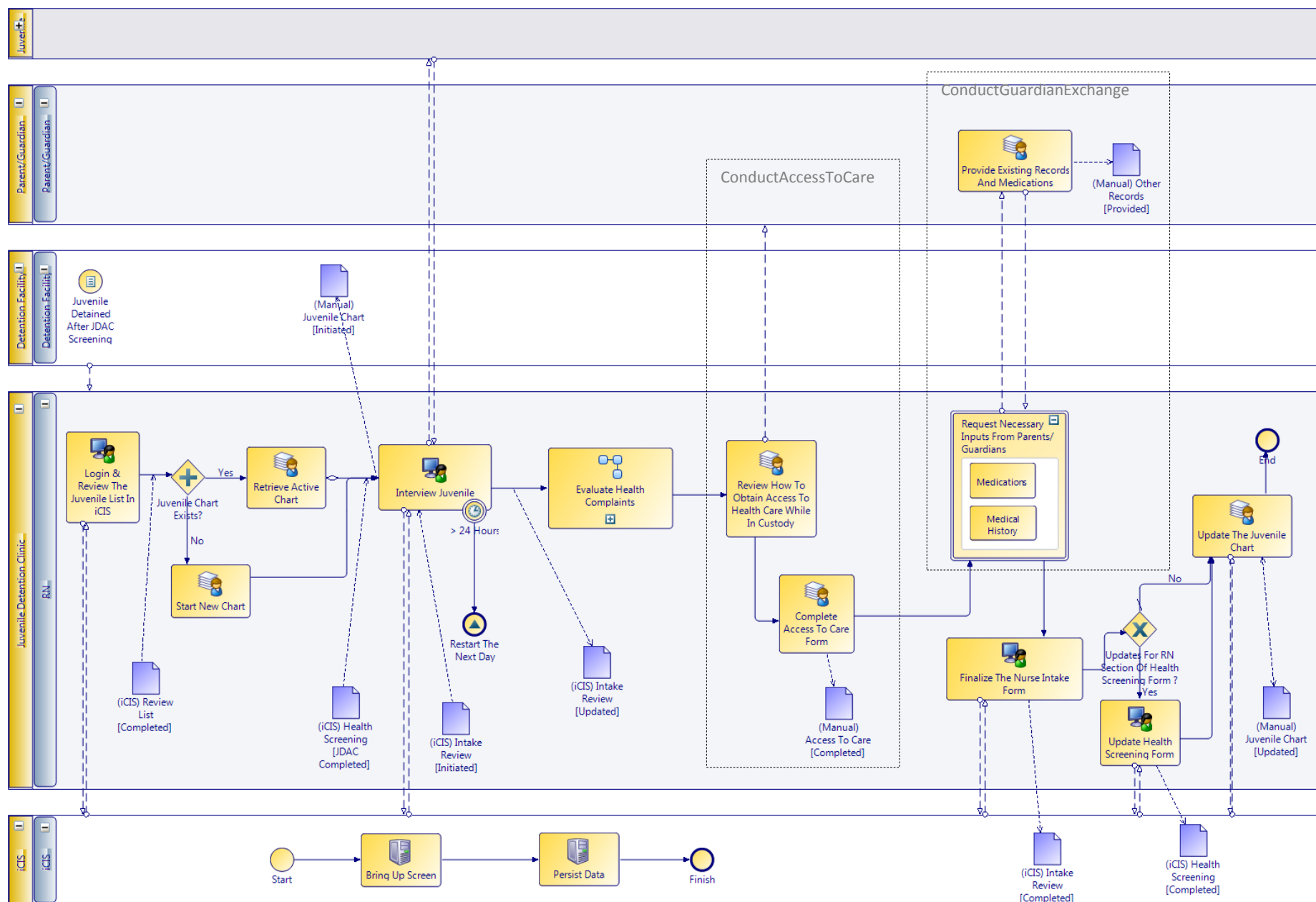
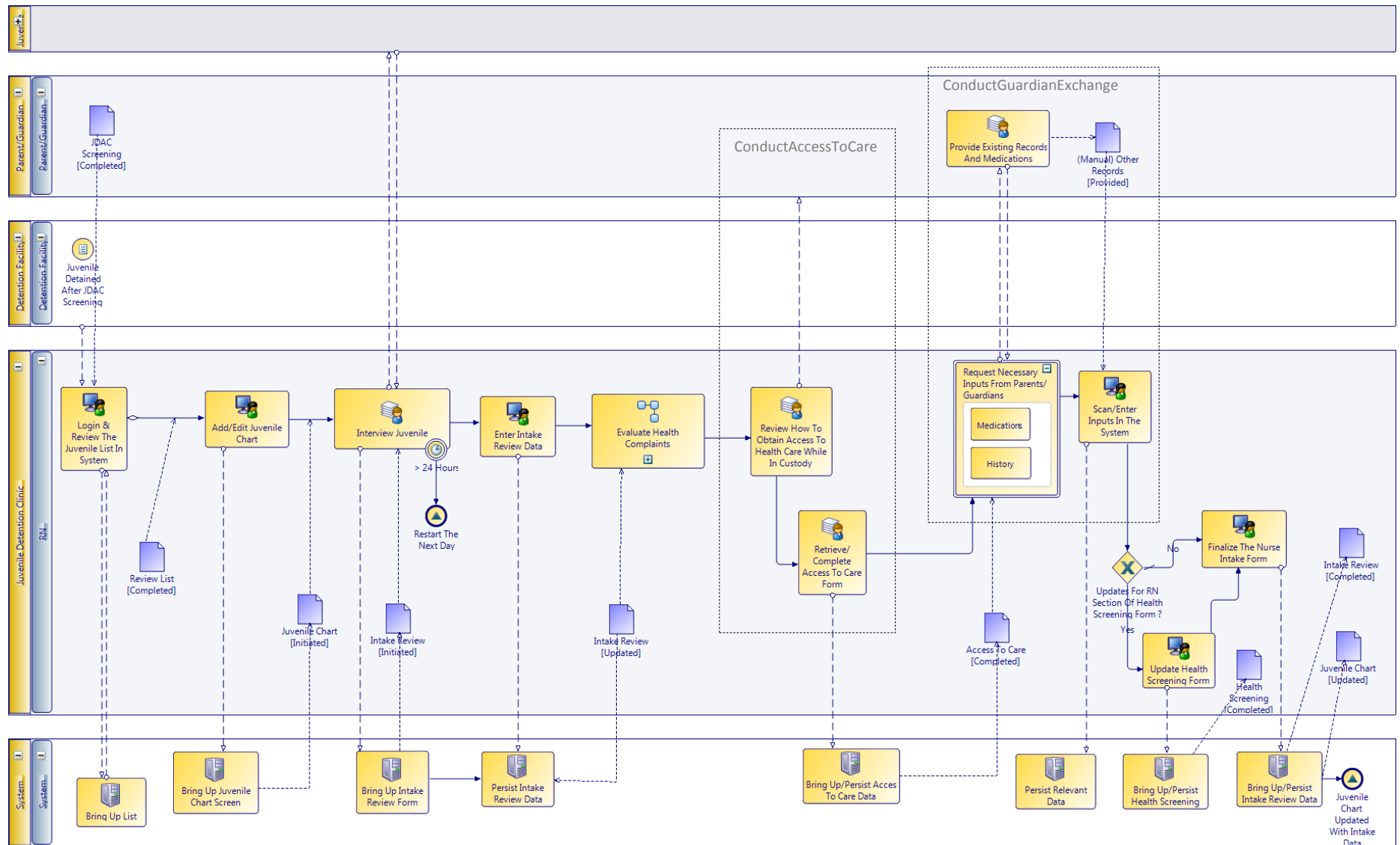


Figure 6: C To-Be P2 "Nurse Intake Process Diagram"



9.2.1 C P2.1 – EVALUATE HEALTH COMPLAINTS

- **Triggering Events/Actions**
 - Positive health complaints identified during health screening
- **Involved Entities**
 - Juvenile Detention Clinic RN
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Provider Order Process
 - Provider Sick Call Process
 - Medical Recommendation Process
- **Pre-conditions**
 - Juvenile screening has been initiated
- **Inputs**
 - Juvenile Chart, Updated
 - Nurse Intake Form, Updated
 - Nurse Assessment Form, BLANK (Initiated)
 - Nurse Progress Note, BLANK (Initiated)
 - Any other inputs, not listed above, pertaining to any of the following sub-processes:
 - Provider Order Process
 - Provider Sick Call Process
 - Medical Recommendation Process
- **Description**
 - During this sub-process, the Clinic RN responds to findings pertaining to the medical condition of the juvenile. If the Provider's involvement is required, either the Provider Order sub-process, or the Provider Sick Call sub-process might follow the RN evaluation. Following the Provider Order sub-process, the Medical Recommendation sub-process may be implemented.
- **Business Rules**
 - Either the Nurse Assessment Form or the Nurse Progress Note can be used to document findings during this process.
 - At least two signoffs are required on any form used
- **Calculations – NONE;**
- **Outputs**
 - Nurse Assessment Form - COMPLETED addressing
 - Any positive health complaints
 - Nurse Progress Note - COMPLETED addressing
 - Any positive health complaints
 - Any other outputs, not listed above, pertaining to any of the following sub-processes:
 - Provider Order Process
 - Provider Sick Call Process
 - Medical Recommendation Process
- **Post-conditions**
 - Juvenile urgent medical needs, if any, are identified and processed

Figure 7: C As-Is P2.1 "Evaluate Health Complaints Process Diagram"

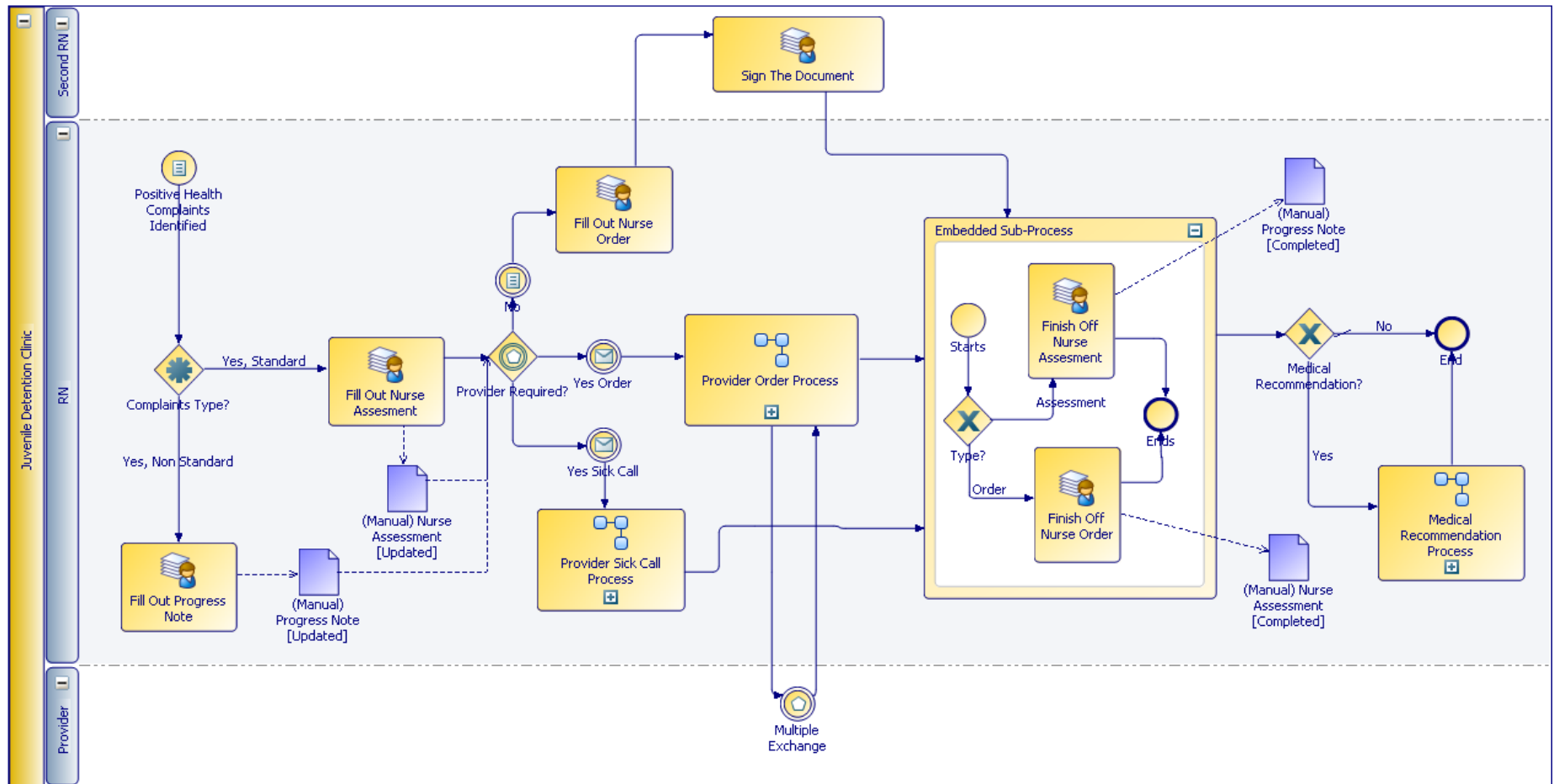
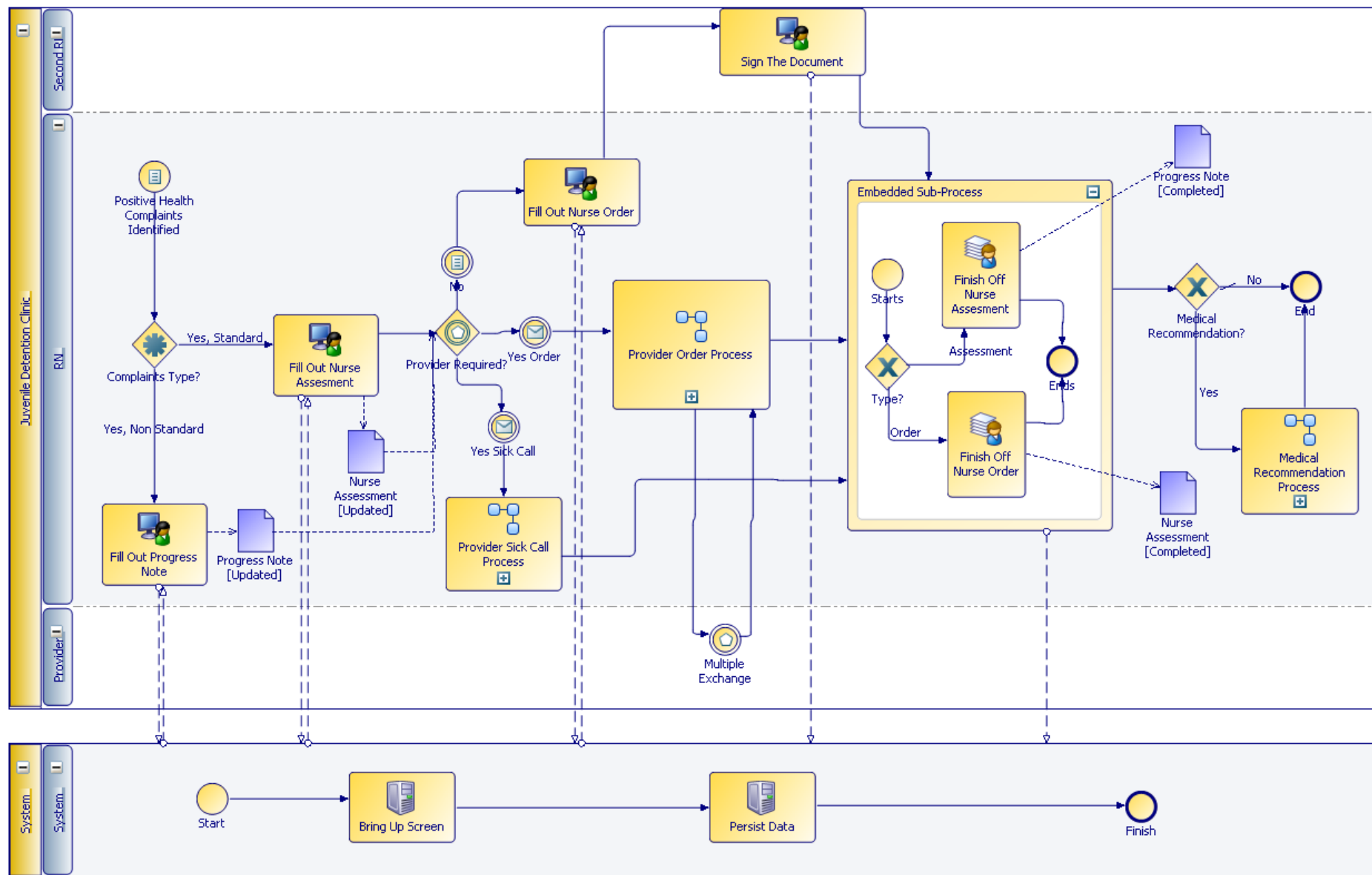


Figure 8: C To-Be P2.1 "Evaluate Health Complaints Process Diagram"



9.2.1.1.1 C P2.1.1 – PROVIDER ORDER

- **Triggering Events/Actions**
 - Health issues to be addressed by Provider.
- **Involved Entities**
 - Juvenile Detention Clinic RN
 - Juvenile Detention Clinic Provider
 - Juvenile Detention Clinic Secretary
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Process Referrals
 - Complete Medical Recommendation
 - Laboratory Services – Sonora
 - Laboratory Services – PHD
- **Pre-conditions**
 - Juvenile has been evaluated
- **Inputs**
 - The Nurse Assessment Form, or the Nurse Progress Note, Updated
 - Order - BLANK (Initiated)
 - Any other inputs, not listed above, pertaining to any of the following sub-processes:
 - Process Referrals
 - Complete Medical Recommendation
 - Laboratory Services – Sonora
 - Laboratory Services – PHD
- **Description**
 - During this sub-process, the Clinic RN processes the Provider's order for the identified positive health complaints. In case further action is required, one or more of the following sub-processes may follow the completion of the order:
 - Process Referrals
 - Complete Medical Recommendation
 - Laboratory Services – Sonora
 - Laboratory Services – PHD
- **Business Rules**
 - Three signoffs are required for the Order:
 - RN
 - Provider
 - Either the Secretary, or a second RN
- **Calculations – NONE**
- **Outputs**
 - Order—COMPLETED addressing
 - Any positive health complaints
 - Any other outPuts, not listed above, pertaining to any of the following sub-processes:
 - Process Referrals

- Complete Medical Recommendation
 - Laboratory Services – Sonora
 - Laboratory Services – PHD
- **Post-conditions**
 - Juvenile urgent medical needs which require Provider's involvement are identified and addressed.

```

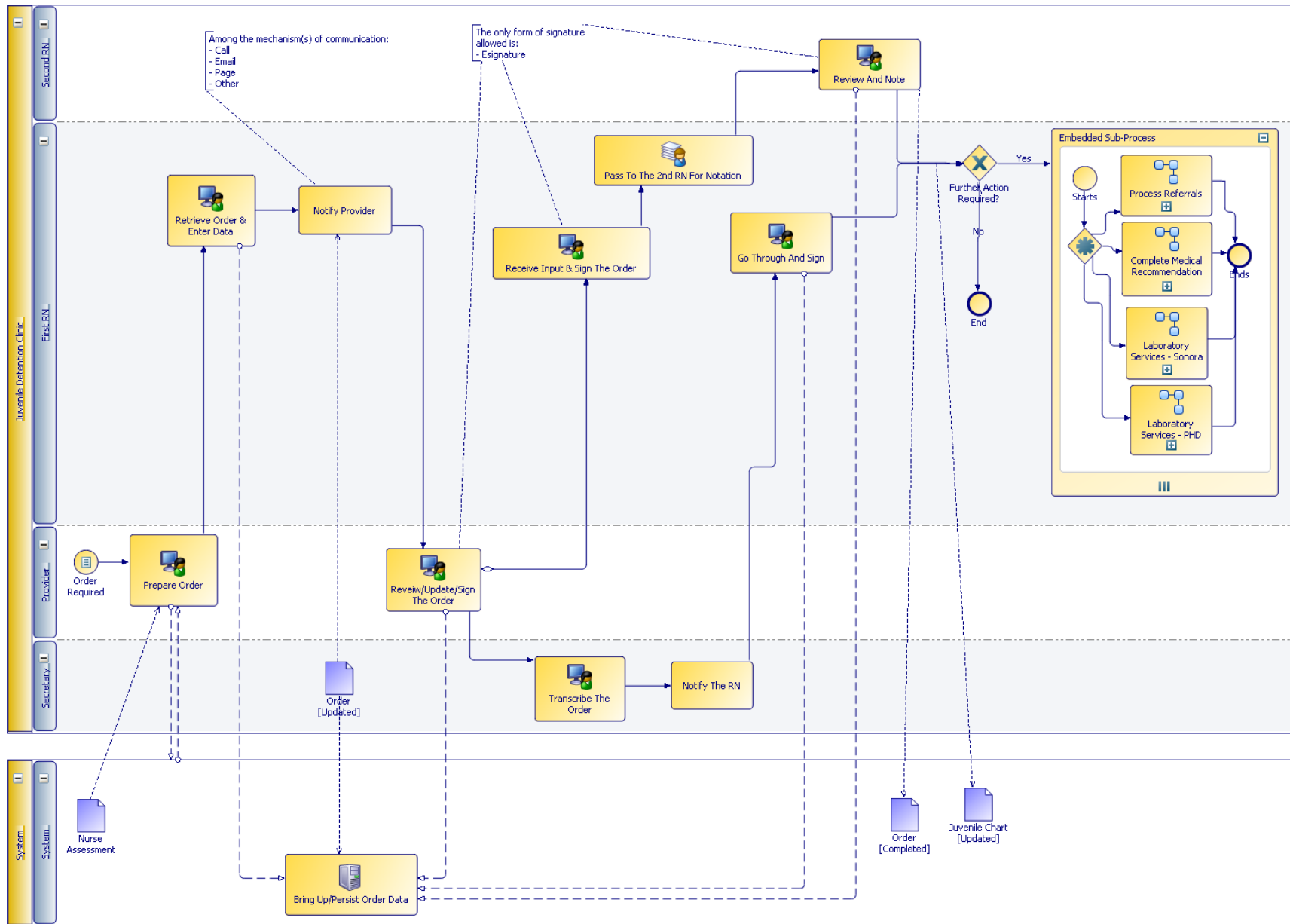
graph TD
    subgraph Secretary_Lane [Secretary]
        Start([Order Required])
        Transcribe[Transcribe & Initial The Order]
        Send[Send The Order To The RN]
        Chart[Manual Juvenile Chart Updated]
    end

    subgraph Provider_Lane [Provider]
        Verbal{Handled Verbally?}
        Guidance[Give Verbal Guidance]
        Sign[Fill Out & Sign The Order]
    end

    subgraph RN_Lane [RN]
        Receive[Receive Input, Fill Out & Sign The Order]
        Pass[Pass To The 2nd RN For Notation]
        Review[Review And Note]
        Note[Note & Sign]
        Action{Further Action Required?}
        End([End])
        SubProcess[Embedded Sub-Process]
    end

    Start -.-> Verbal
    Verbal -- Yes --> Guidance
    Verbal -- No --> Sign
    Sign --> Transcribe
    Transcribe --> Send
    Send --> Receive
    Receive --> Pass
    Pass --> Review
    Review --> Note
    Note --> Action
    Action -- Yes --> SubProcess
    Action -- No --> End
    SubProcess --> End
    End -.-> Chart
    
```

Figure 10: C To-Be P2.1.1 "Provider Order Process Diagram"



- **Triggering Events/Actions**
 - Juvenile has been detained for 3 days.
- **Involved Entities**
 - Juvenile
 - Juvenile Detention Clinic Health Technician
 - Juvenile Detention Clinic RN
 - Juvenile Detention Clinic Provider
 - iCIS
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Laboratory Services – Sonora
 - Laboratory Services – PHD
 - Tuberculin Skin Test
 - Evaluate Health Complaints
 - Nurse Sick Call
- **Pre-conditions**
 - The Nurse Intake has been completed.
- **Inputs**
 - iCIS Review List
 - Juvenile Chart, capturing
 - Medical History Data
 - Current Medical Condition
 - iCIS Health Appraisal Form - BLANK
 - Health Care Review Form - BLANK
 - Any other inputs, not listed above, pertaining to the following sub-processes:
 - Laboratory Services – Sonora
 - Laboratory Services – PHD
 - Tuberculin Skin Test (TST)
 - Evaluate Health Complaints
 - Nurse Sick Call
- **Description**
 - During this process, the Clinic RN or the Juvenile health Technician (JHT) obtains a medical history and a psycho-social history from the Juvenile.
 - One or more of the following sub-processes are also carried out as part of the collect medical data activity:
 - Laboratory Services – Sonora
 - Laboratory Services – PHD
 - Tuberculin Skin Test
 - If Juvenile has medical complaints, one of the following sub-processes is carried out (depending on the type of the symptoms):
 - Evaluate Health Complaints

- Nurse Sick Call
- **Business Rules**
 - Performed after three (3) days of detainment
- **Calculations** – NONE;
- **Outputs**
 - Health Appraisal Form—COMPLETED capturing
 - Medical History Data
 - Current Medical Condition
 - Screening Test Results
 - Health Care Request Form, Completed in iCIS
 - Juvenile Chart, Updated
 - Juvenile medical history – Updated in iCIS
 - Any other outputs, not listed above, pertaining to the following sub-processes:
 - Laboratory Services – Sonora
 - Laboratory Services – PHD
 - Tuberculin Skin Test
 - Evaluate Health Complaints
 - Nurse Sick Call
- **Post-conditions**
 - Updated Juvenile Medical History
 - Updated Juvenile Profile in iCIS

Figure 11: C As-Is P3 "Health Appraisal Process Diagram"

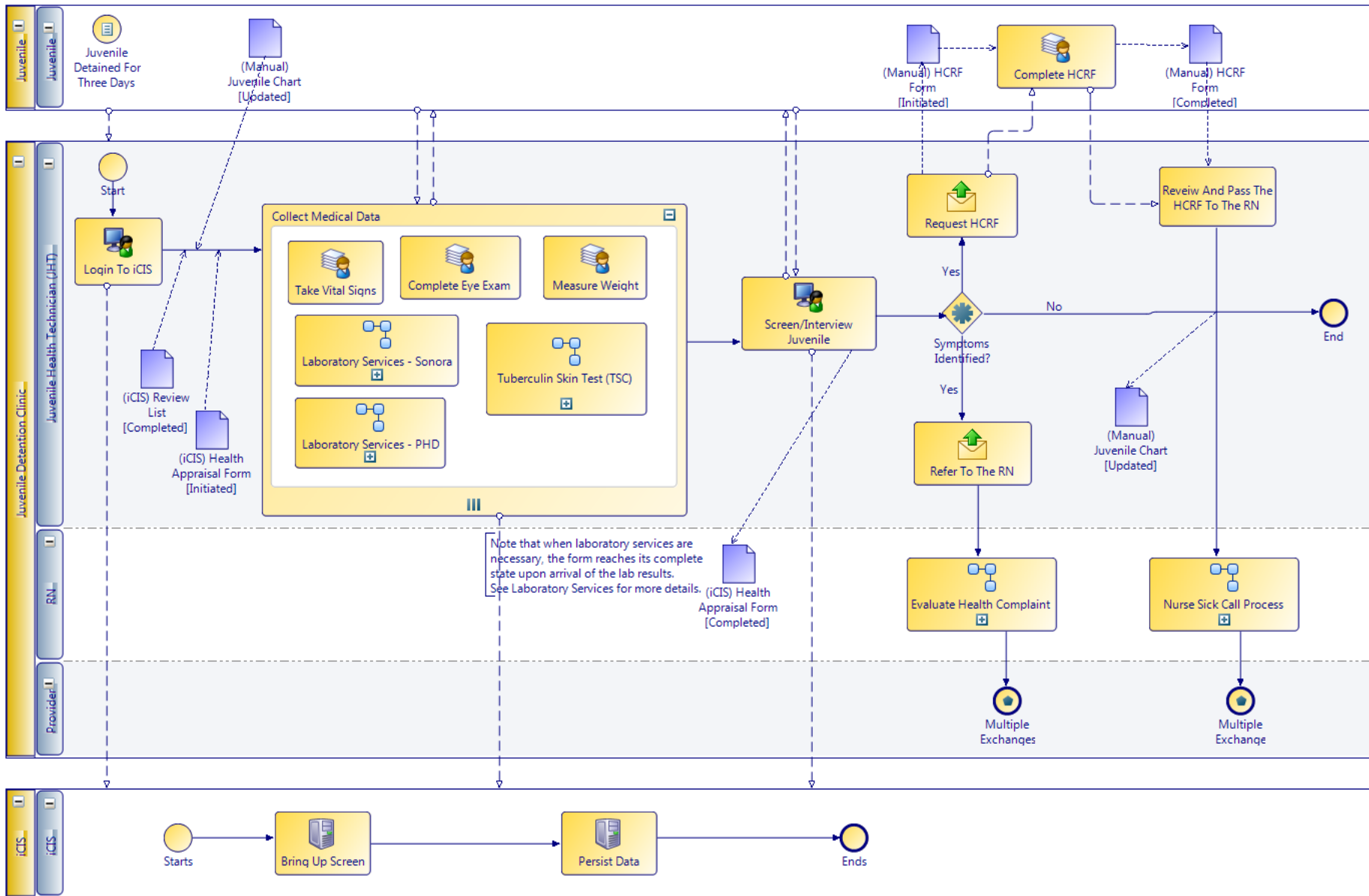
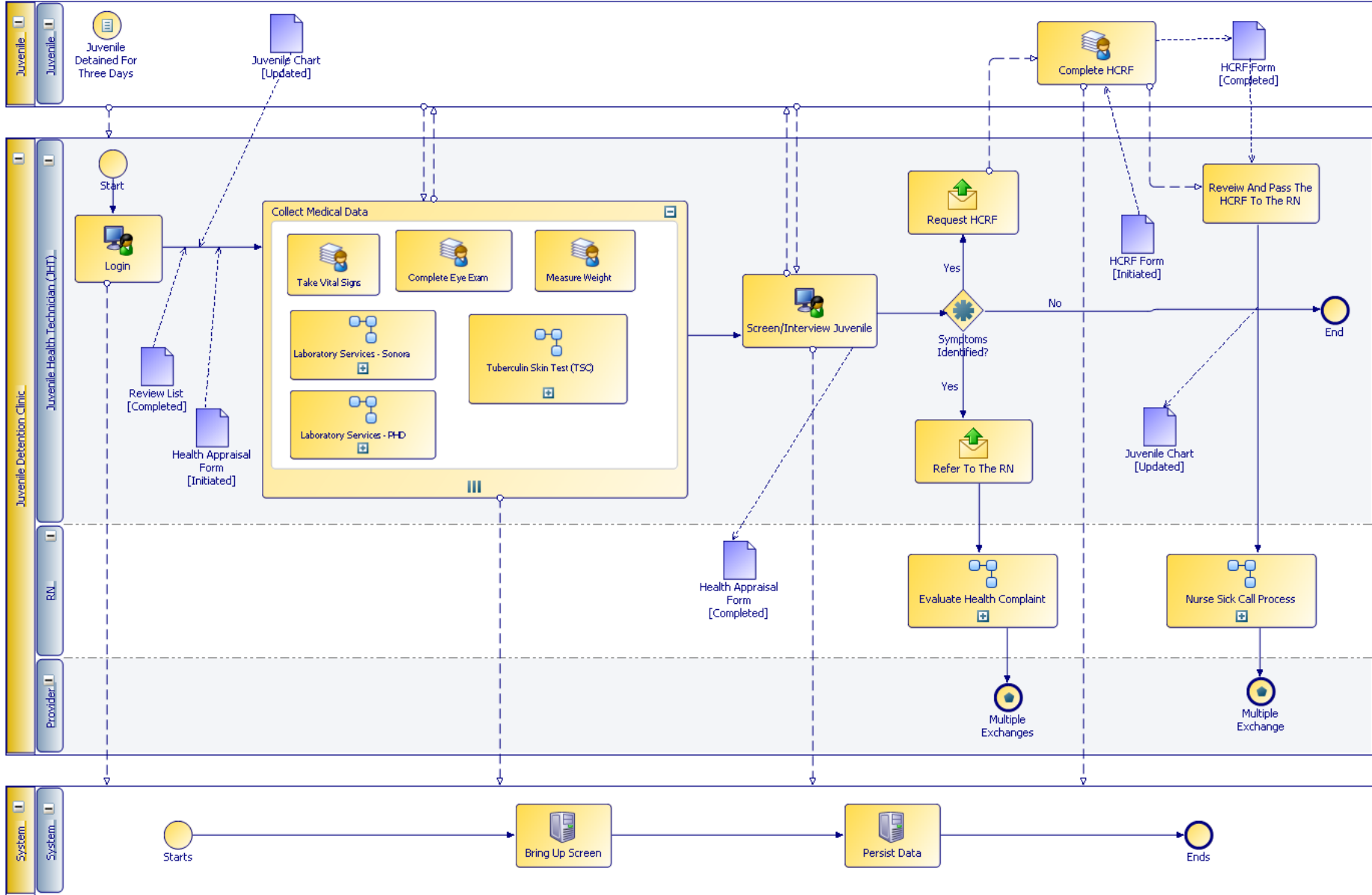


Figure 12: C To-Be P3 "Health Appraisal Process Diagram"



9.4 C P4 – PHYSICAL EXAMINATION

- **Triggering Events/Actions**
 - Juvenile has been detained for 7 days
- **Involved Entities**
 - Juvenile
 - Juvenile Health Technician (JHT)
 - Juvenile Detention Clinic Provider
 - iCIS
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Cover Detainee Health Needs With Provider
- **Pre-conditions**
 - The Juvenile Health Appraisal has been performed.
- **Inputs**
 - iCIS Juvenile Review List
 - Juvenile Chart, capturing
 - Medical History Data
 - Current Medical Condition
 - iCIS Physical Exam Form—BLANK
 - Any other inputs, not listed above, pertaining to any of the following sub-processes:
 - Provider Order
- **Description**
 - During this process, the Juvenile Health Technician obtains vital signs and the Clinic provider completes a comprehensive health examination, establishes a treatment plan (if necessary), orders immunization, referrals and other orders.
 - If further treatment is considered necessary by the provider, the following sub-processes is carried out:
 - Provider Order
- **Business Rules**
 - Performed after seven (7) days of detainment
- **Calculations – NONE;**
- **Outputs**
 - Physical Exam Form—COMPLETED
 - Juvenile Chart—Updated
 - Juvenile profile—Updated in iCIS
 - Any other outputs, not listed above, pertaining to any of the following sub-processes:
 - Provider Order
- **Post-conditions**
 - Updated Juvenile Medical History

Figure 13: C As-Is P4 "Physical Examination Process Diagram"

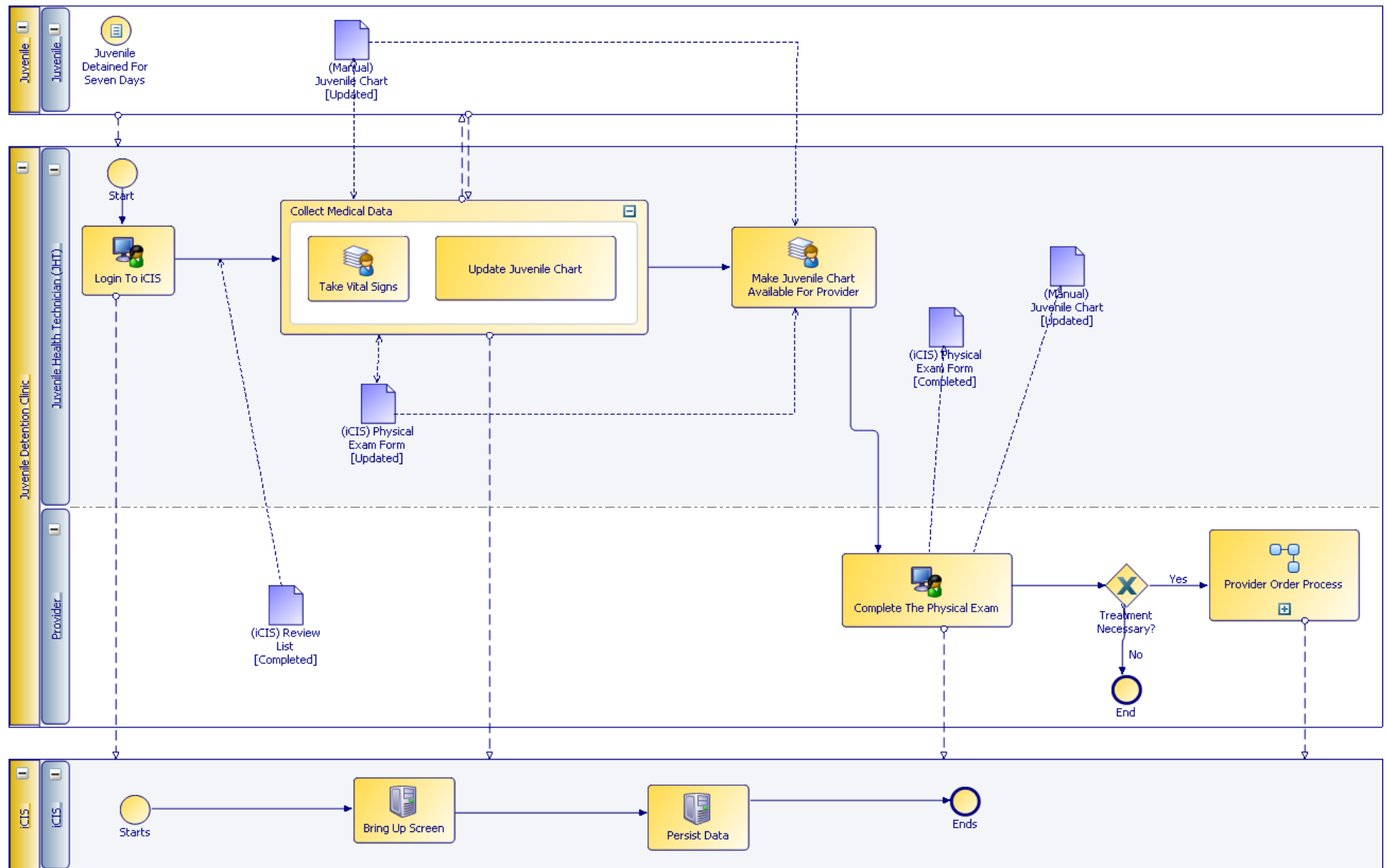
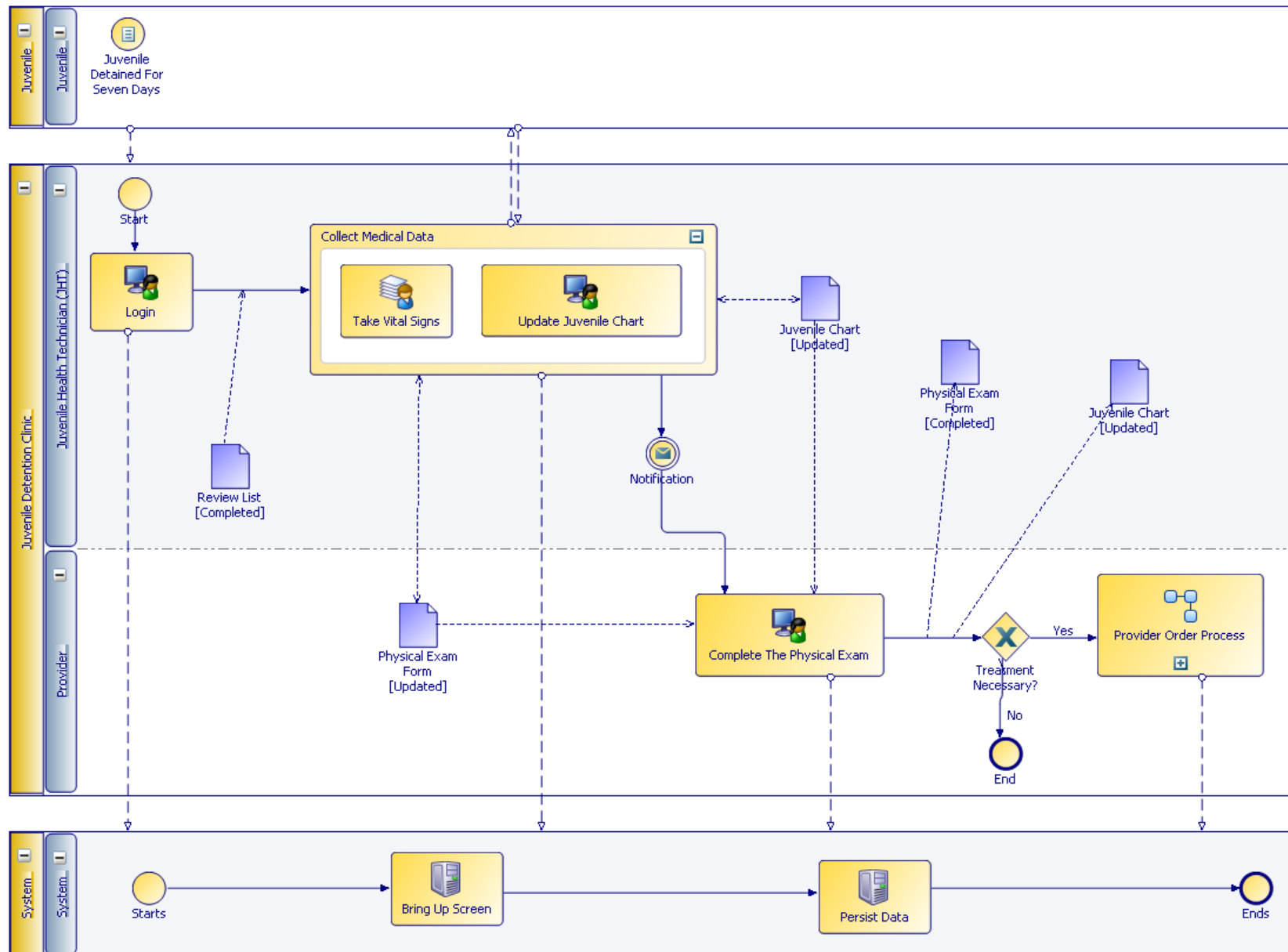


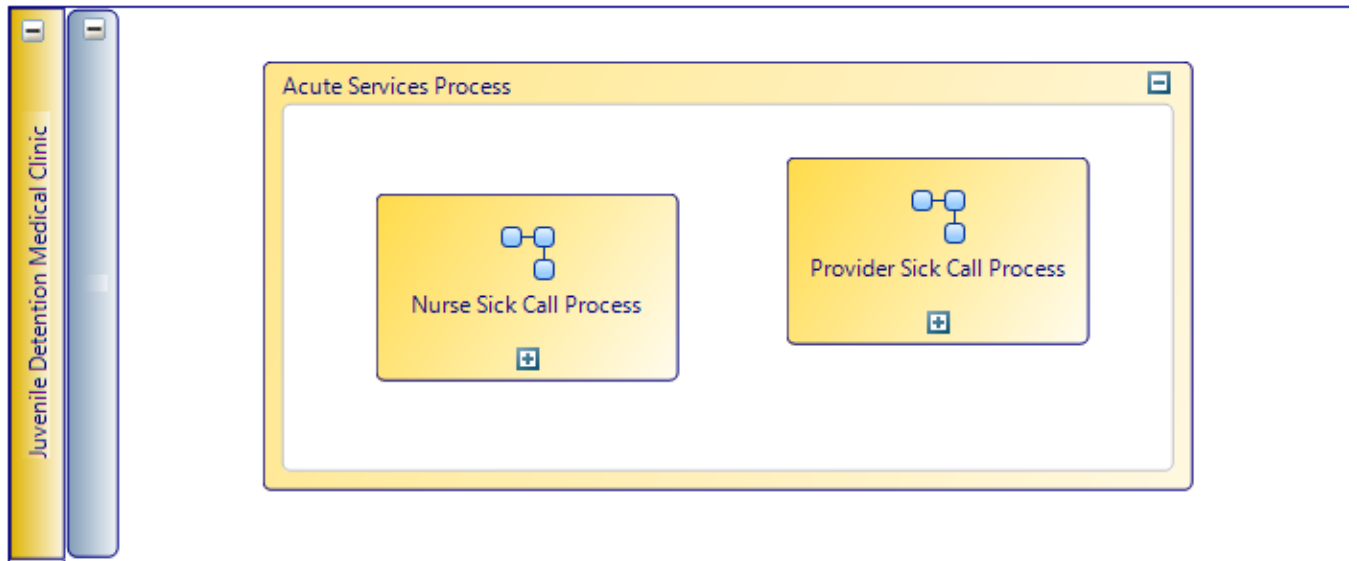
Figure 14: C-To-Be P4 "Physical Examination Process Diagram"



9.5 C P5 – ACCUTE SERVICES

Acute Services are carried out via the Provider Sick Call process and the Nurse Sick Call process. Descriptions of the services rendered during each of these processes are given in Sections 9.5.1 and 9.5.2.

Figure 15: C As-Is P5 "Acute Services Process Diagram"



- **Triggering Events/Actions**
 - Juvenile does not feel well
- **Involved Entities**
 - Juvenile
 - Juvenile Detention Center Staff
 - Juvenile Detention Clinic RN
 - Any other entities, not listed above, involved in either of the following sub-processes:
 - Evaluate Health Complaints
- **Pre-conditions**
 - Juvenile is in custody.
- **Inputs**
 - Healthcare Request Form
 - Triage Guidelines
 - RN Sick Call Roster
 - Nurse Assessment Form
 - Juvenile Chart
 - Any other inputs, not listed above, pertaining to any of the following sub-processes:
 - Evaluate Health Complaints
- **Description**
 - The process begins with the Juvenile completing a Health Care Request Form (HCRF). Upon receiving the HCRF, the RN evaluates the Juvenile and, if further treatment is necessary, the following sub-process is carried out:
 - Evaluate Health Complaints
- **Business Rules** – NONE;
- **Calculations** – NONE;
- **Outputs**
 - Healthcare Request Form - Completed
 - RN Sick Call Roster - Updated
 - Juvenile Chart - Updated
 - Any other outputs, not listed above, pertaining to any of the following sub-processes:
 - Evaluate Health Complaints
- **Post-conditions**
 - Updated Juvenile Medical History

Figure 16: C As-Is P5.1 "Nurse Sick Call Process Diagram"

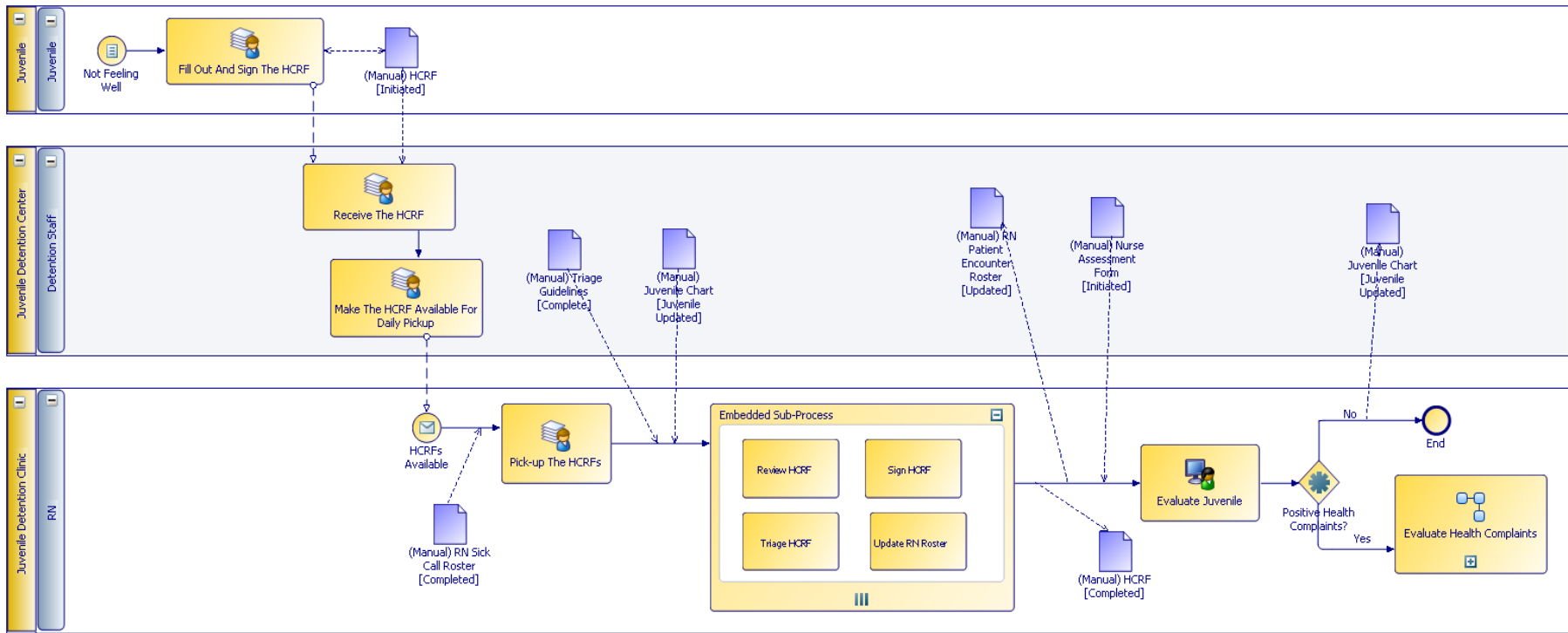
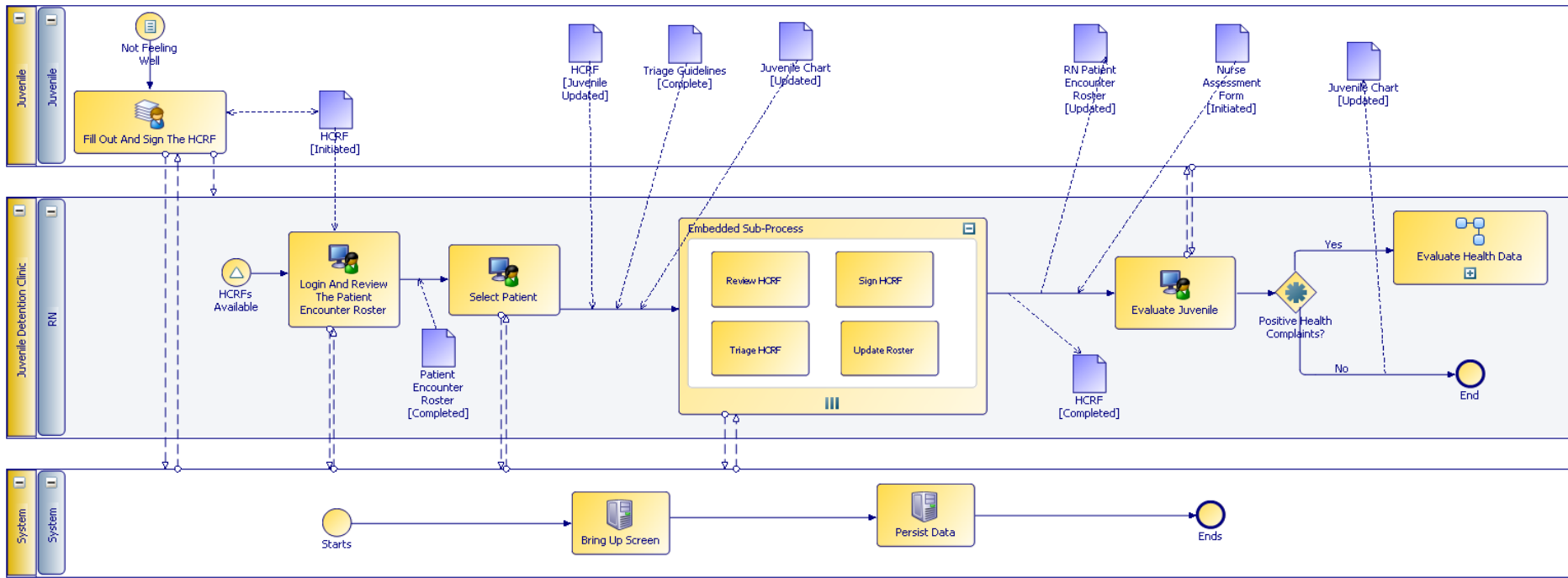


Figure 17: C To-Be P5.1 "Nurse Sick Call Process Diagram"



9.5.2 C P5.2 – PROVIDER SICK CALL

- **Triggering Events/Actions**
 - Medical complaint(s) which require provider's expertise.
- **Involved Entities**
 - Juvenile
 - Juvenile Detention Clinic Provider
 - JHT
 - Any other entities, not listed above, involved in either of the following sub-processes:
 - Provider Order Process
- **Pre-conditions**
 - Juvenile has been evaluated during Nurse Sick Call.
- **Inputs**
 - Provider Sick Call Roster
 - Provider Assessment Form
 - Juvenile Chart
 - Any other inputs, not listed above, pertaining to any of the following sub-processes:
 - Provider Order Process
- **Description**
 - The process begins with a complaint requiring medical expertise from the Provider.
 - The JHT takes the vital signs and passes the information to the Provider, who addresses the Juvenile's medical complaints.
- **Business Rules** – NONE;
- **Calculations** – NONE;
- **Outputs**
 - Healthcare Request Form - **COMPLETED**
 - RN Sick Call Roster - Updated
 - Juvenile Chart - Updated
 - Any other outputs, not listed above, pertaining to any of the following sub-processes:
 - Provider Order Process
- **Post-conditions**
 - Updated Juvenile Medical History

Figure 18: C As-Is P5.2 "Provider Sick Call Process Diagram"

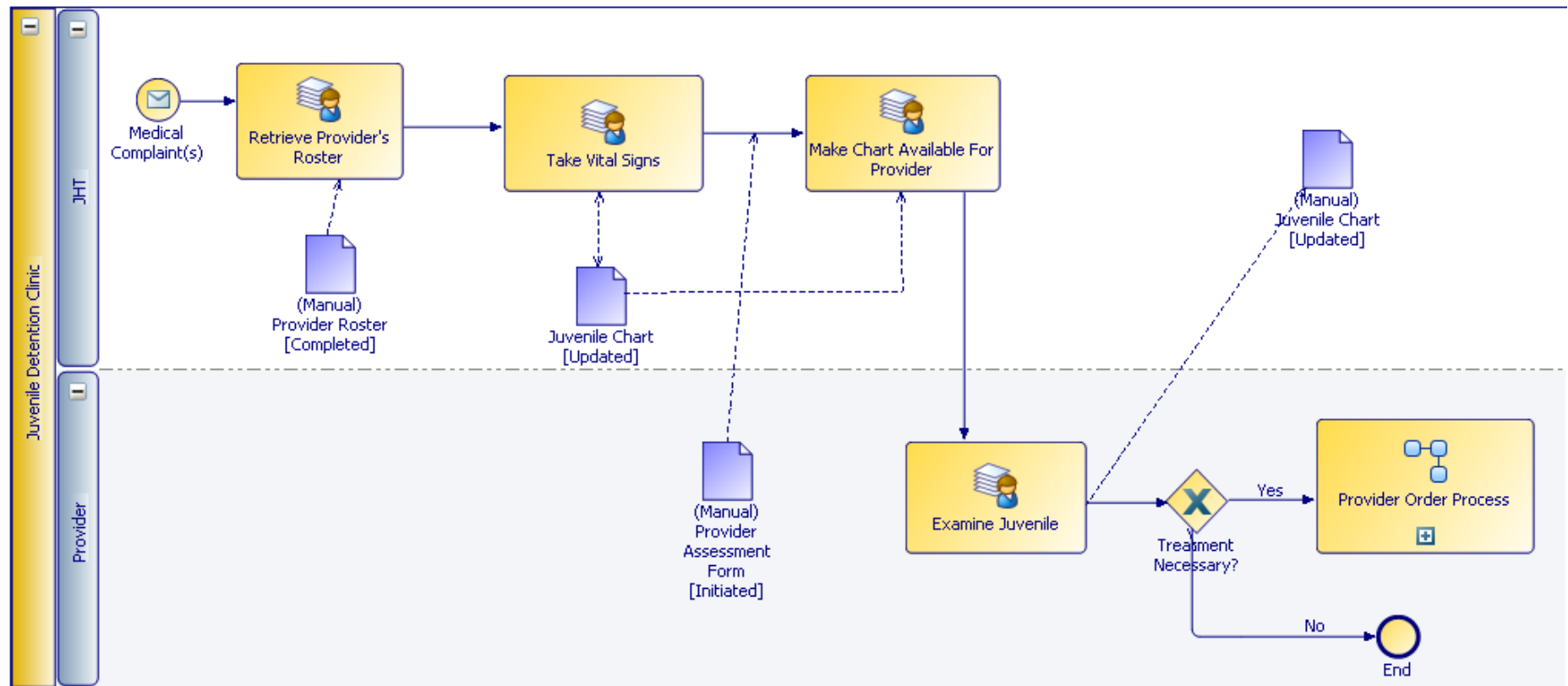
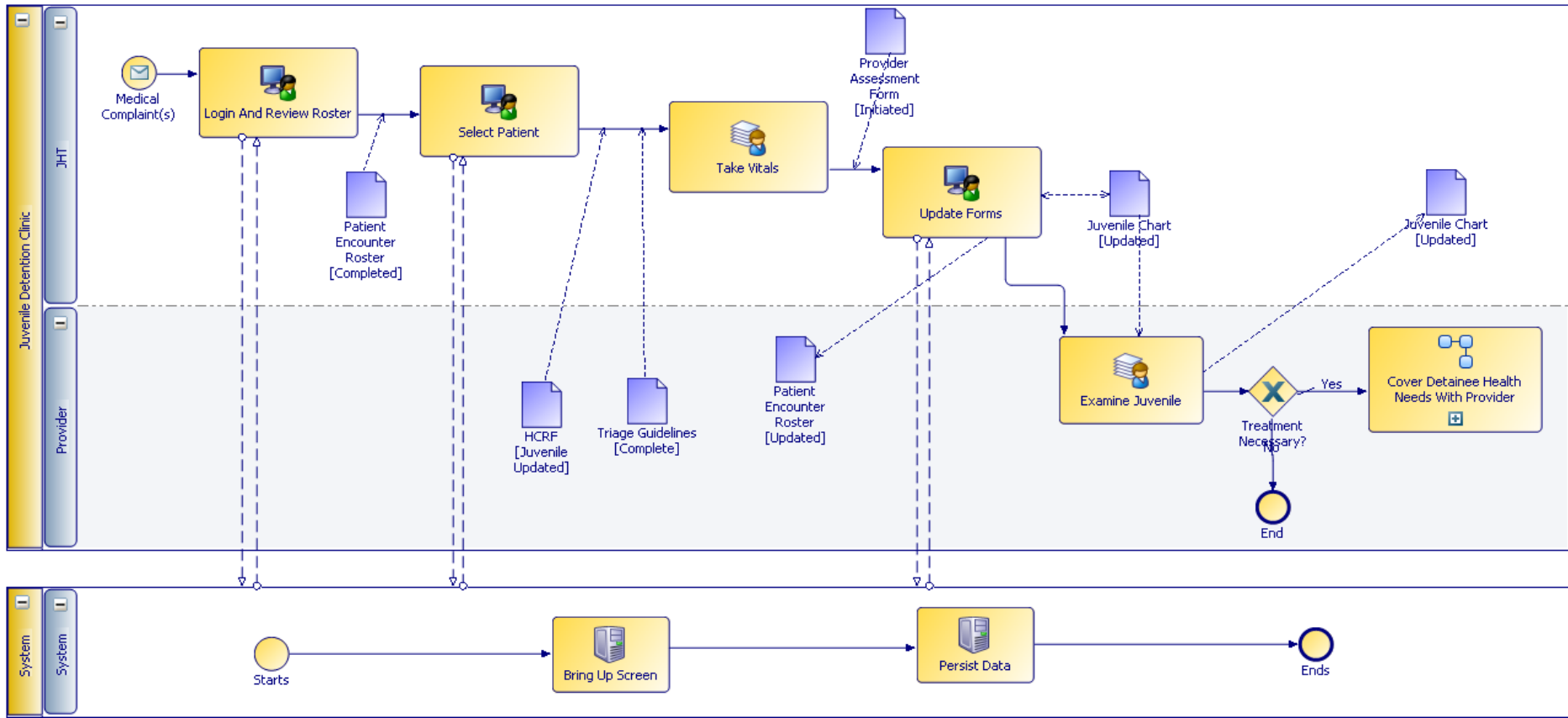


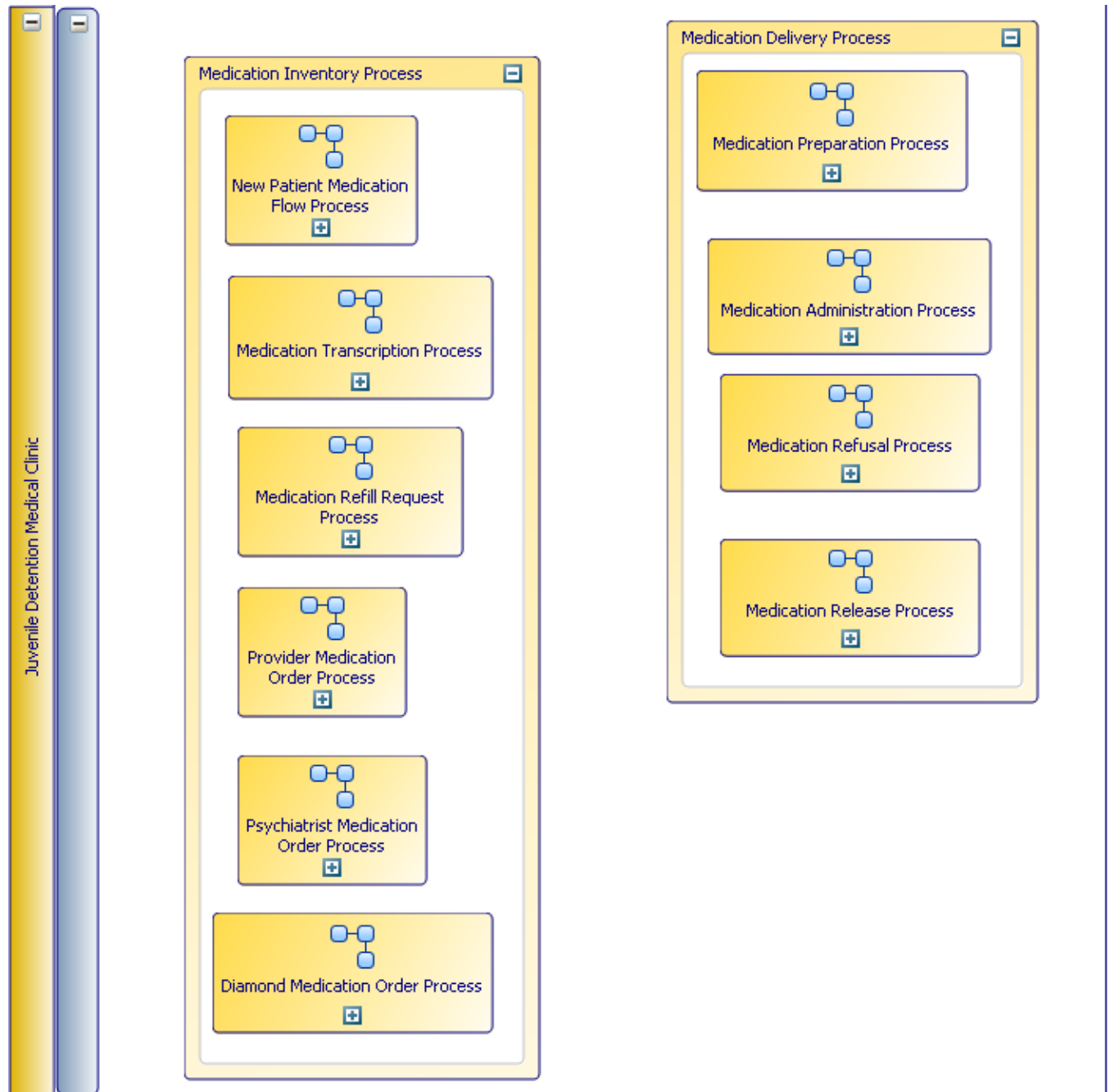
Figure 19: C To-Be P5.2 "Provider Sick Call Process Diagram"



- **Triggering Events/Actions**
 - Juvenile must use medicine.
- **Involved Entities**
 - Any entities involved in either of the following sub-processes:
 - New Patient Medication Flow Process
 - Medication Transcription Process
 - Medication Refill Request Process
 - Provider Medication Order Process
 - Psychiatrist Medication Order Process
 - Diamond Medication Order Process
 - Medication Preparation Process
 - Medication Administration Process
 - Medication Release Process
 - Provider Order Process
- **Pre-conditions**
 - Juvenile is in custody
 - Existing order for medication to be taken by Juvenile
 - New order for medication to be taken by Juvenile
- **Inputs**
 - Any inputs pertaining to any of the following sub-processes:
 - New Patient Medication Flow Process
 - Medication Transcription Process
 - Medication Refill Request Process
 - Provider Medication Order Process
 - Psychiatrist Medication Order Process
 - Diamond Medication Order Process
 - Medication Preparation Process
 - Medication Administration Process
 - Medication Release Process
 - Provider Order Process
- **Description**
 - The activities pertaining to medication services have been grouped into the medication inventory process and medication delivery process.
- **Business Rules**
 - Any business rules pertaining to any of the sub-processes listed below apply:
 - New Patient Medication Flow Process
 - Medication Transcription Process
 - Medication Refill Request Process
 - Provider Medication Order Process
 - Psychiatrist Medication Order Process

- Diamond Medication Order Process
 - Medication Preparation Process
 - Medication Administration Process
 - Medication Release Process
 - Provider Order Process
- **Calculations** – NONE;
- **Outputs**
 - Any outputs pertaining to any of the following sub-processes:
 - New Patient Medication Flow Process
 - Medication Transcription Process
 - Medication Refill Request Process
 - Provider Medication Order Process
 - Psychiatrist Medication Order Process
 - Diamond Medication Order Process
 - Medication Preparation Process
 - Medication Administration Process
 - Medication Release Process
 - Provider Order Process
- **Post-conditions**
 - Any post conditions pertaining to any of the sub-processes listed below apply:
 - New Patient Medication Flow Process
 - Medication Transcription Process
 - Medication Refill Request Process
 - Provider Medication Order Process
 - Psychiatrist Medication Order Process
 - Diamond Medication Order Process
 - Medication Preparation Process
 - Medication Administration Process
 - Medication Release Process
 - Provider Order Process

Figure 20: C As-Is P6 “Medication Services Process Diagram”



- **Triggering Events/Actions**
 - The Juvenile is taking a medication.
- **Involved Entities**
 - Guardian
 - Juvenile Detention Clinic Medication RN
 - Juvenile Detention Clinic Provider
 - Juvenile Detention Clinic Secretary (HUC)
 - Insurance Coverage Questionnaire (ICQ) Group
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Medication Refill Request Process
 - Medication Transcription Process
 - Provider Order Process
- **Pre-conditions**
 - Juvenile is “in custody”.
- **Inputs**
 - Medication Prescription Label
 - Medication Inventory Form – Blank
 - Nurse Assessment Forms (guidelines)
 - Insurance Coverage Questionnaire (ICQ) Form – Blank
 - Medical Administration Record (MAR) – Blank
 - Psychiatrist Roster
 - Any other inputs, not listed above, pertaining to any of the following processes:
 - Medication Refill Request Process
 - Medication Transcription Process
 - Provider Order Process
- **Description**
 - The Clinic Medication RN reviews the Juvenile’s medications with Guardian, if available, to ensure the Juvenile receives the appropriate medication.
 - If a less than 10 days supply of psychotropic medications is present, the Clinic Medication RN begins the Medication Refill Request process.
 - If the Juvenile has not taken the medication within the past 7 days, the Provider Order Process is initiated.
- **Business Rules**
 - Two signoffs are required on the Medication Inventory Form:
 - The guardian’s signature
 - The Medication RN’s signature
- **Calculations** – None
- **Outputs**
 - Medication Inventory Form – Completed
 - Insurance Coverage Questionnaire (ICQ) Form – Completed

- Medical Administration Record (MAR) – Updated
 - Juvenile Chart – Updated
 - Psychiatrist Roster – Updated
 - Any other outputs, not listed above, pertaining to any of the following processes:
 - Medication Refill Request Process
 - Medication Transcription Process
 - Provider Order Process
- **Post-conditions**
 - The post-conditions of the Medication Transcription process apply.

Figure 21: CAs-Is P6.1 "New Patient Medication Flow Process Diagram"

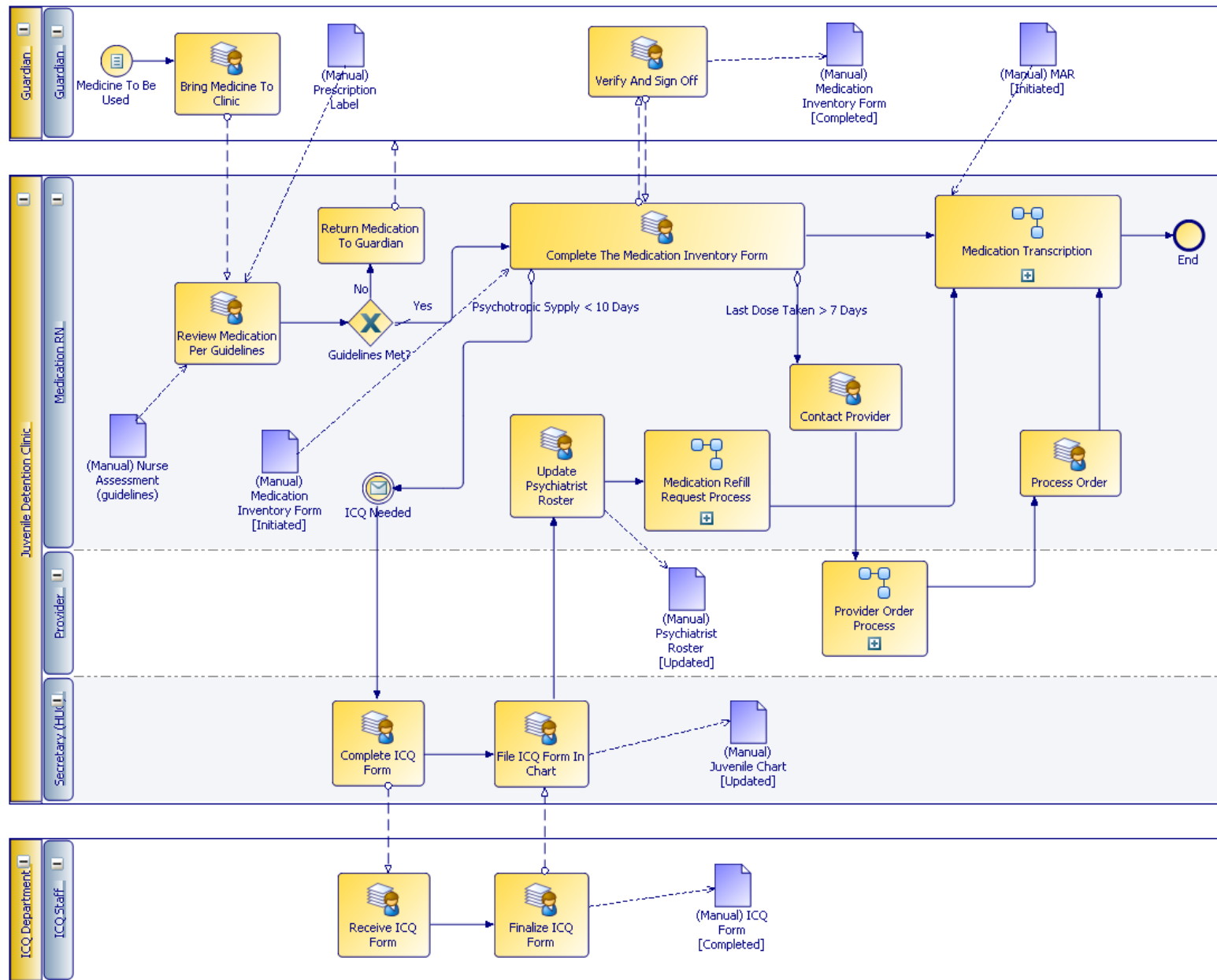
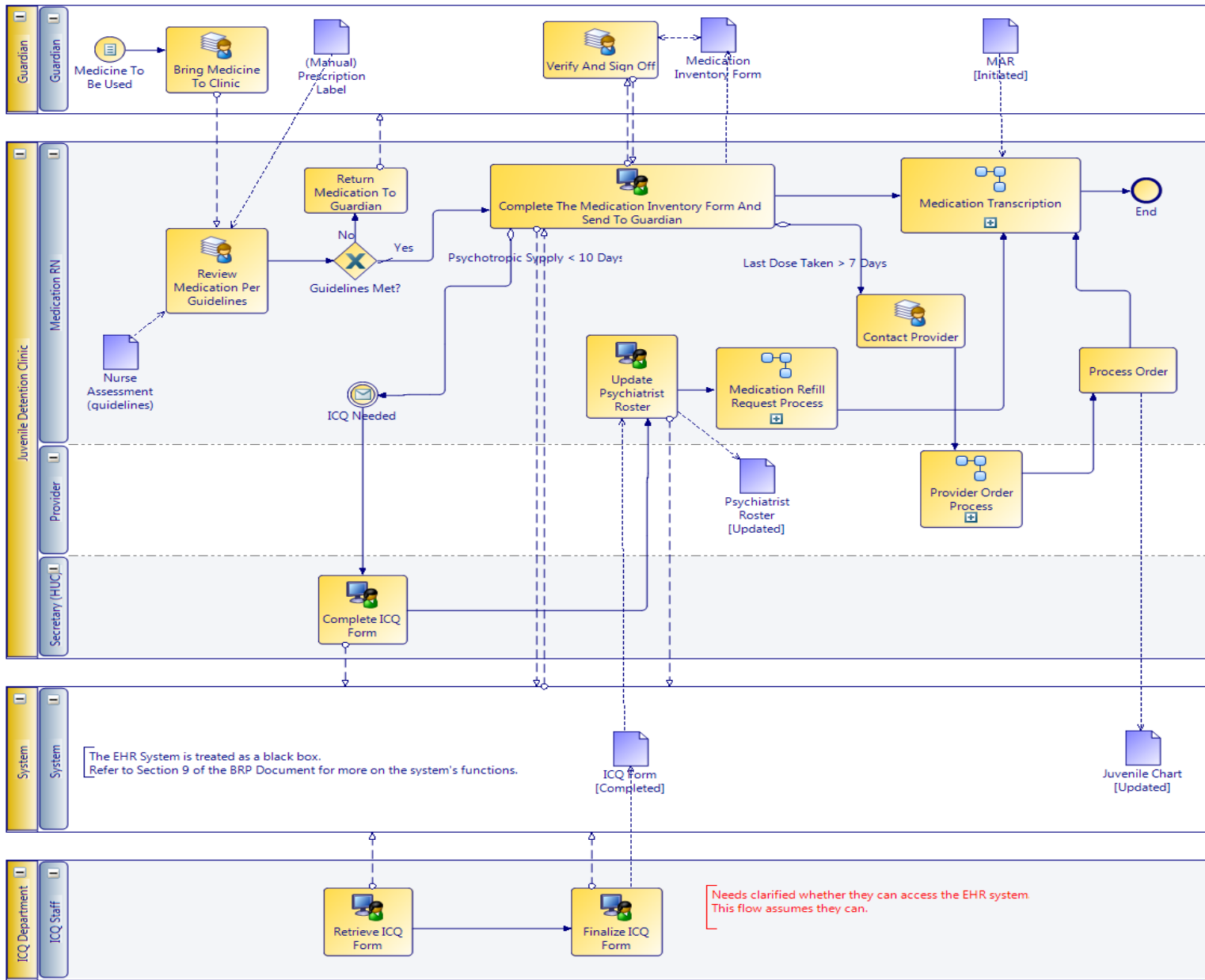


Figure 22: C To-Be P6.1 "New Patient Medication Flow Process Diagram"



9.6.2 C P6.2 – MEDICATION TRANSCRIPTION

- **Triggering Events/Actions**
 - Medicine is to be administered to Juvenile.
- **Involved Entities**
 - Juvenile Detention Clinic Medication RN
 - Juvenile Detention Clinic Secretary (HUC)
 - Juvenile Detention Clinic Second RN
- **Pre-conditions**
 - One of the following forms has been completed:
 - Medication Inventory Form
 - Medication Request Refill Form
 - Provider Order Form
 - Psychiatrist Order Form
- **Inputs**
 - Any of the following forms – Completed:
 - Medication Inventory Form
 - Medication Request Refill Form
 - Provider Order Form
 - Psychiatrist Order Form
 - MAR
 - MAR Binder
 - Juvenile Chart
- **Description**
 - During this process the necessary entries are made onto the Medical Administration Record (MAR) Form.
- **Business Rules**
 - Two signoffs are required on the Medication Administration Record (MAR) Form:
 - The Medication RN's signature
 - A second RN's signature
- **Calculations** – NONE;
- **Outputs**
 - MAR – Updated
 - MAR Binder – Updated
 - Juvenile Chart – Updated
- **Post-conditions**
 - The updated MAR is filed in the MAR Binder.

Figure 23: CAs-Is P6.2 "Medication Transcription Process Diagram"

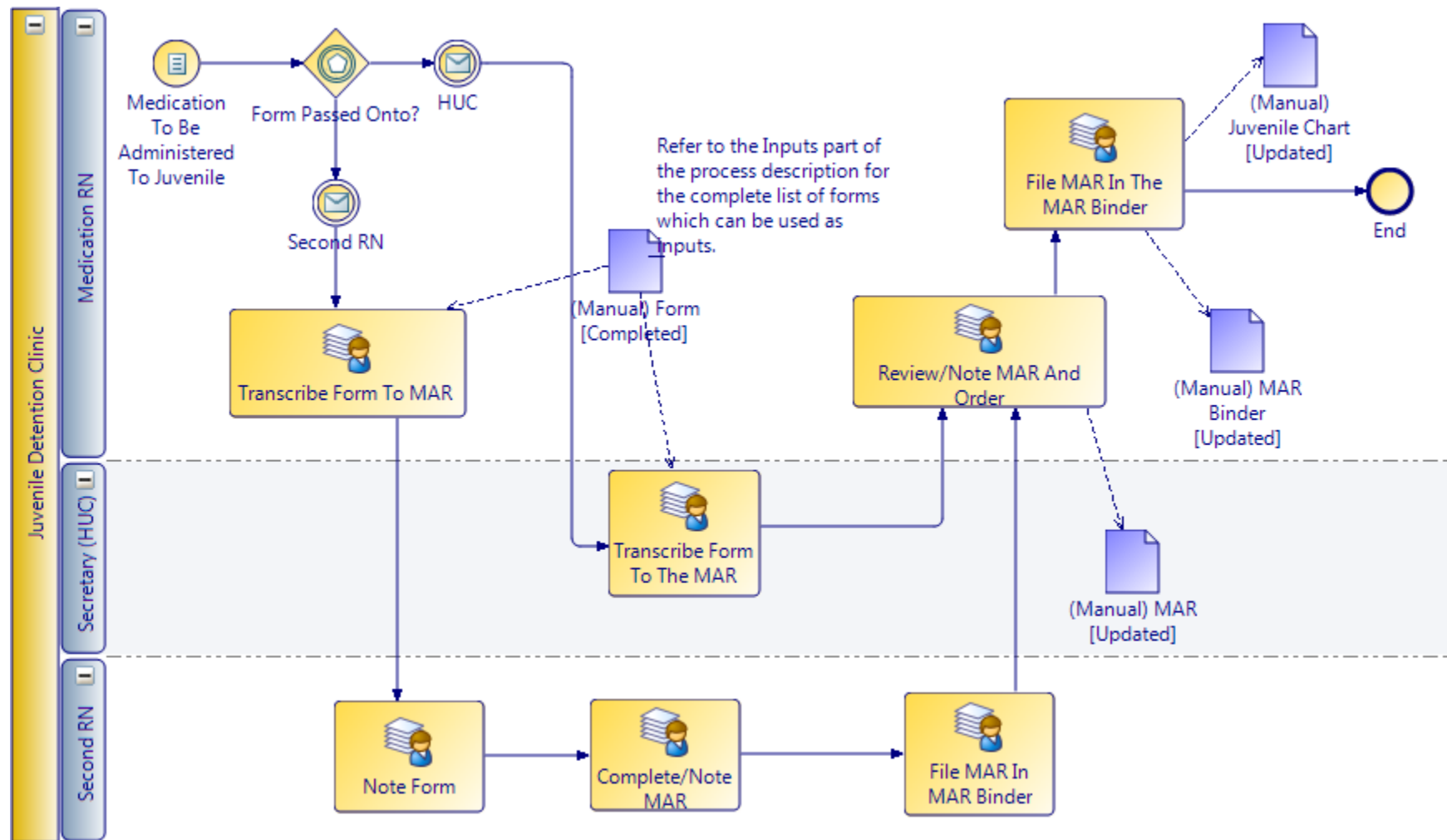
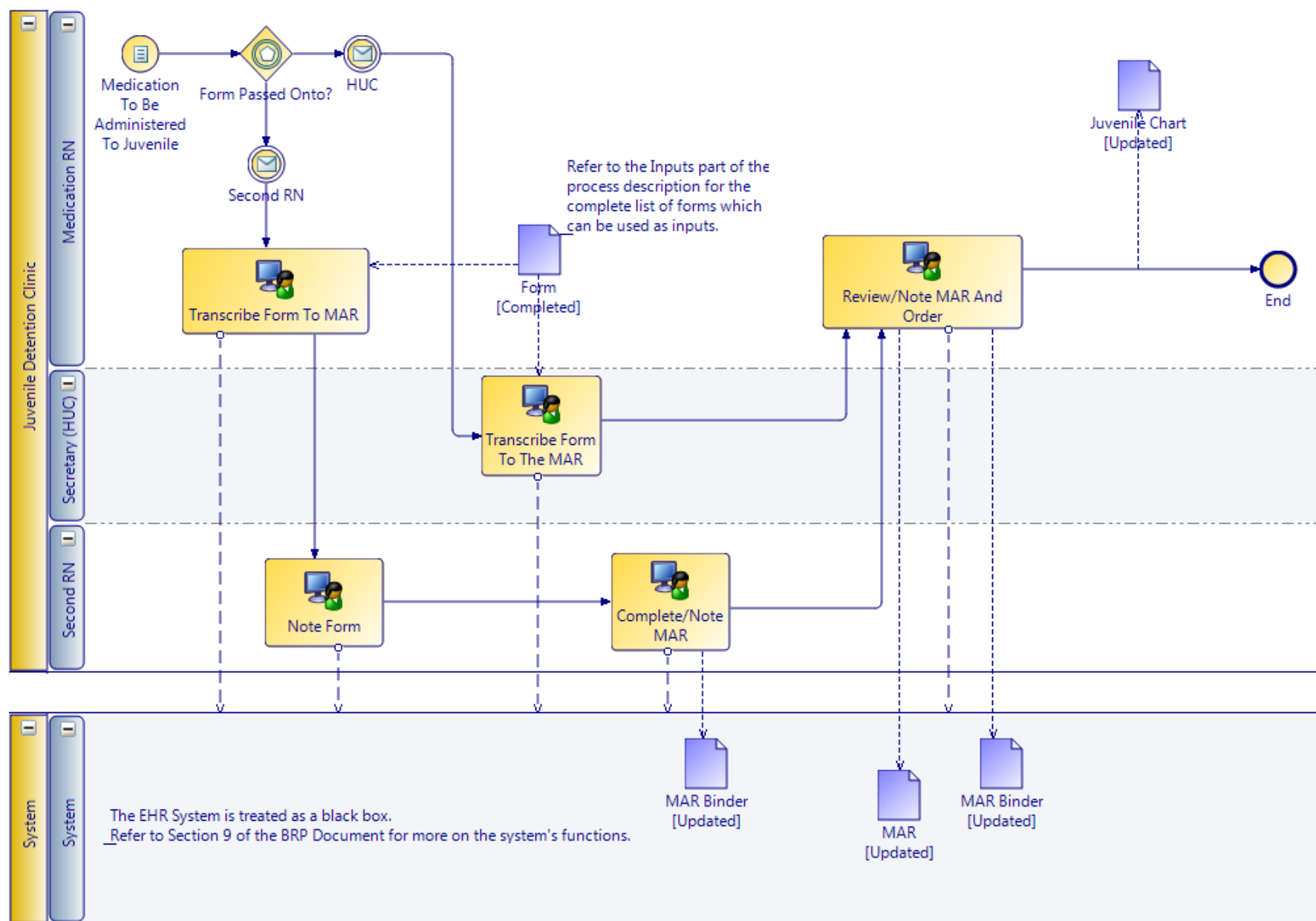


Figure 24: C-To-Be P6.2 "Medication Transcription Process Diagram"



9.6.3 C P6.3 – MEDICATION REFILL REQUEST

- **Triggering Events/Actions**
 - Less than 10 day psychotropic supply (for newly admitted patient)
 - Medicine has reached par level
- **Involved Entities**
 - Guardian
 - Juvenile Detention Clinic Medication RN
 - Juvenile Detention Clinic Provider
 - Juvenile Detention Clinic Psychiatrist
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Provider Order Process
 - Provider Medication Order Process
 - Psychiatrist Medication Order Process
 - Medication Transcription Process
- **Pre-conditions**
 - Juvenile is “in custody”.
- **Inputs**
 - Medication Refill Request Form – Blank
 - Psychiatrist Roster
 - Any other inputs, not listed above, pertaining to any of the following processes:
 - Provider Order Process
 - Provider Medication Order Process
 - Psychiatrist Medication Order Process
 - Medication Transcription Process
- **Description**
 - The process involves the Clinic Medication RN supervising and maintaining the required supply levels for the medications administered by the Clinic.
- **Business Rules**
 - Medicine must not fall below par level.
- **Calculations** – None
- **Outputs**
 - Medication Refill Request Form – Completed
 - Psychiatrist Roster – Updated
 - Any other outputs, not listed above, pertaining to any of the following processes:
 - Provider Order Process
 - Provider Medication Order Process
 - Psychiatrist Medication Order Process
 - Medication Transcription Process
- **Post-conditions**
 - The post-conditions of the Medication Order Process – Provider and/or Medication Order Process – Psychiatrist apply.

Figure 25: C As-Is P6.3 "Medication Refill Request Process Diagram"

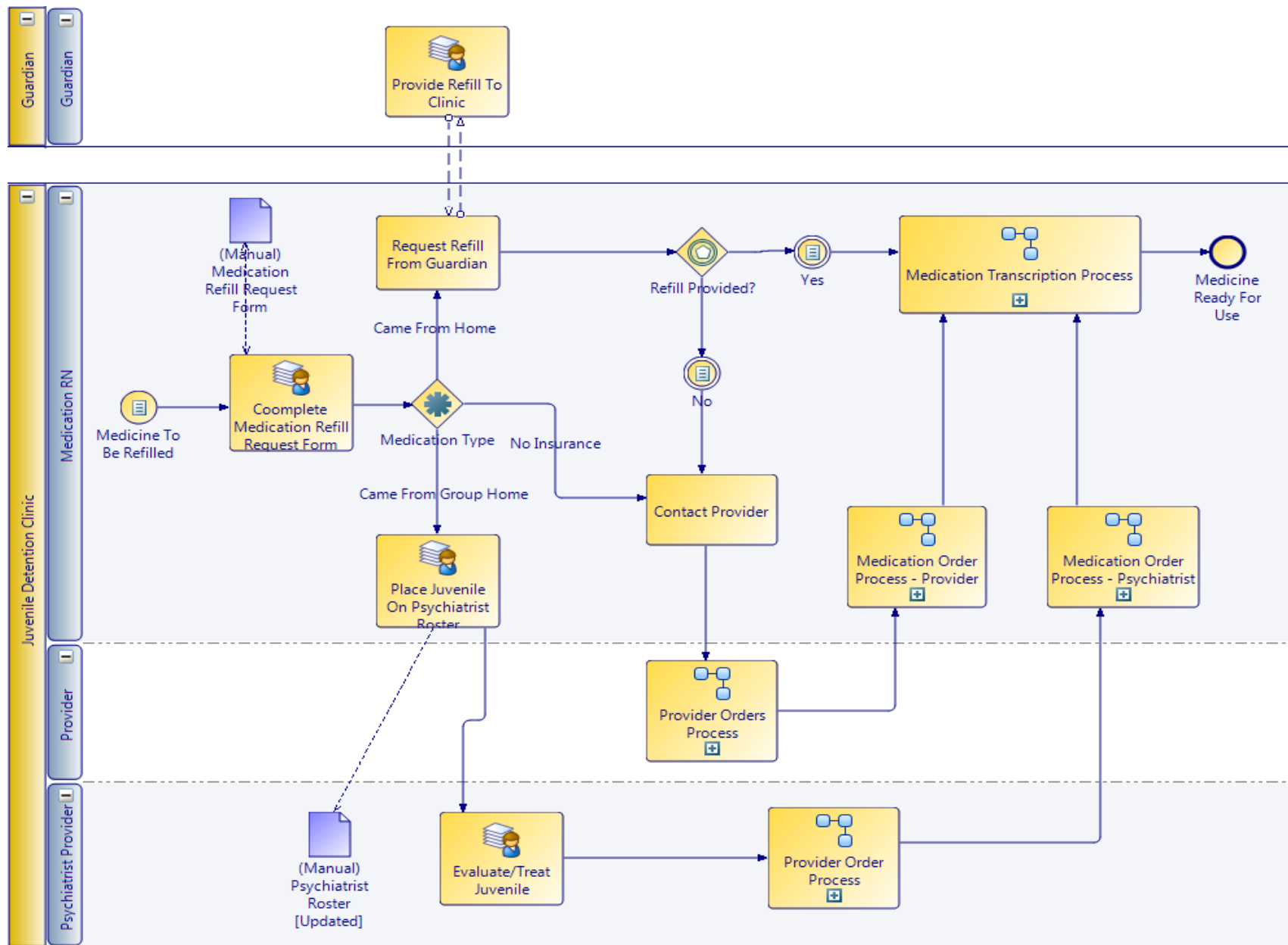
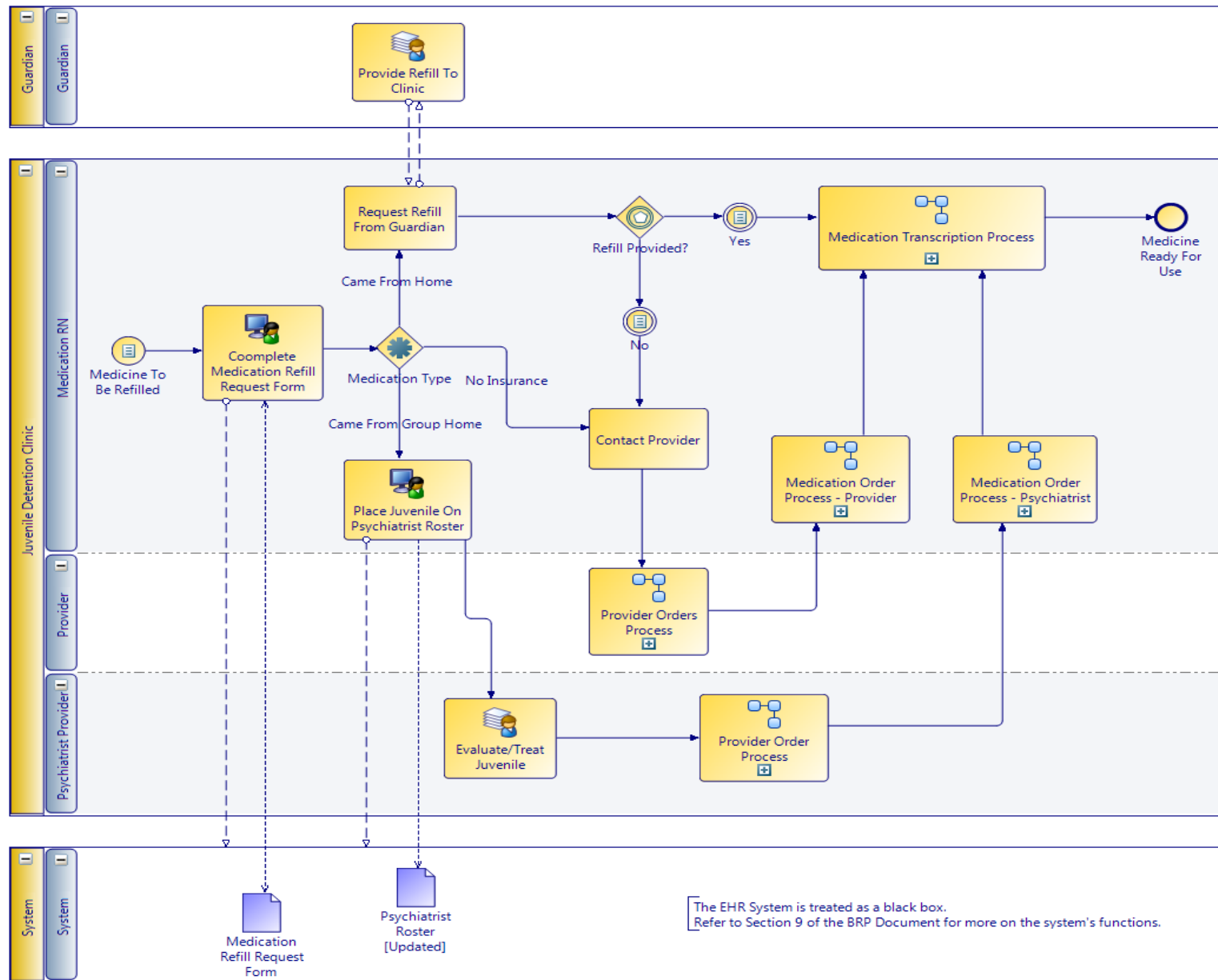


Figure 26: C To-Be P6.3 "Medication Refill Request Process Diagram"



9.6.4 C P6.4 – PROVIDER MEDICATION ORDER

- **Triggering Events/Actions**
 - Medicine prescribed by Provider
- **Involved Entities**
 - Juvenile Detention Clinic Provider
 - Juvenile Detention Clinic Medication RN
 - Juvenile Detention Center Staff
 - Walgreen Pharmacy
 - Diamond Pharmacy
 - Any other entities, not listed above and involved in the following sub-process:
 - Medication Transcription Process
- **Pre-conditions**
 - Juvenile has been evaluated by Provider.
- **Inputs**
 - Provider Prescription
 - Any other inputs, not listed above, pertaining to the following process:
 - Medication Transcription Process
- **Description**
 - During this process, the process the Clinic RN orders the medication from either Walgreen or Diamond pharmacy, depending upon the urgency of the medication and the insurance status.
- **Business Rules**
 - Urgent orders must be obtained from Walgreen's Pharmacy
- **Calculations** – None
- **Outputs**
 - Provider Prescription
 - Any other outputs, not listed above, pertaining to the following process:
 - Medication Transcription Process
- **Post-conditions**
 - The medicine is ready to be administered.

Figure 27: C As-Is P6.4 "Provider Medication Order Process Diagram"

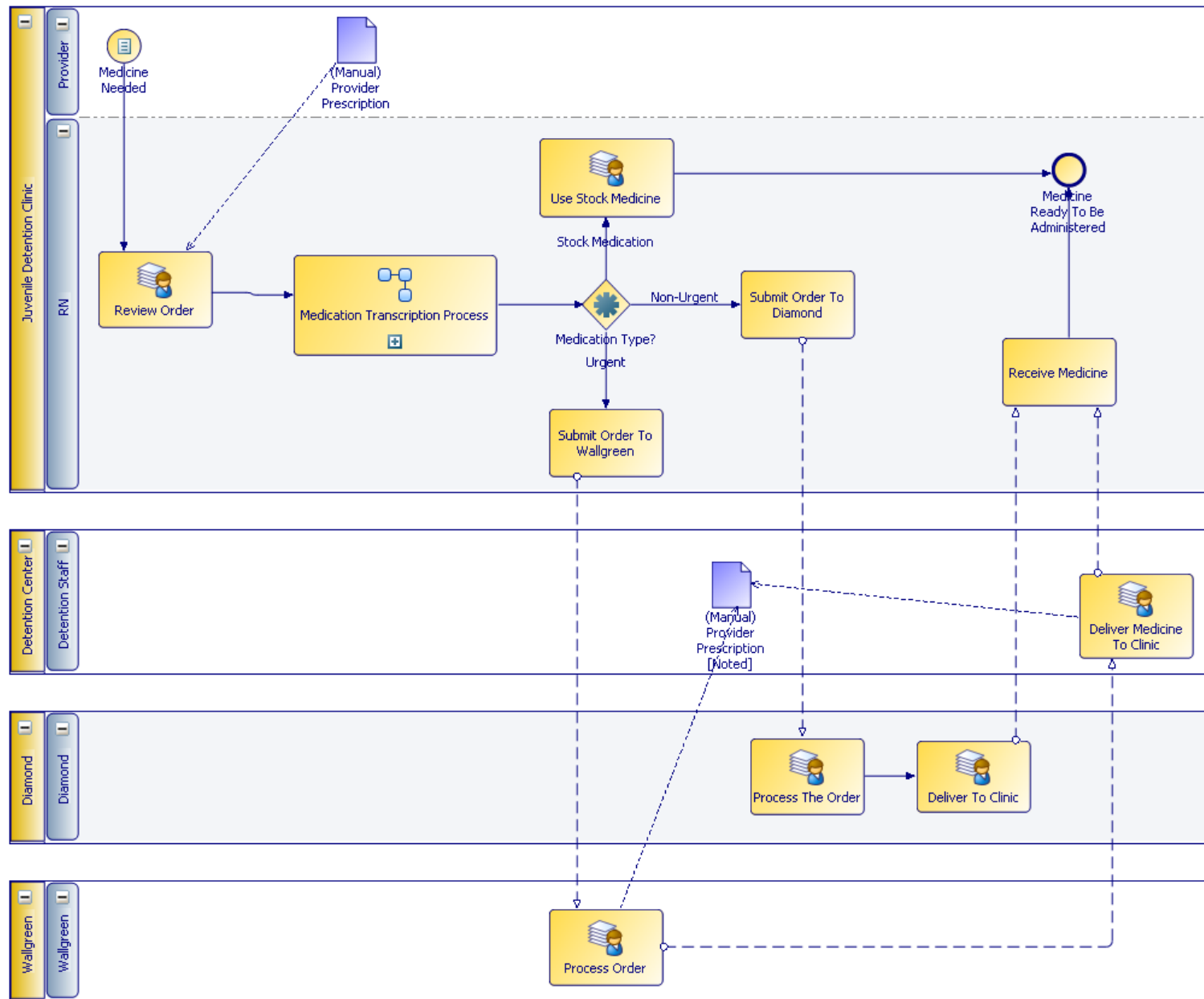
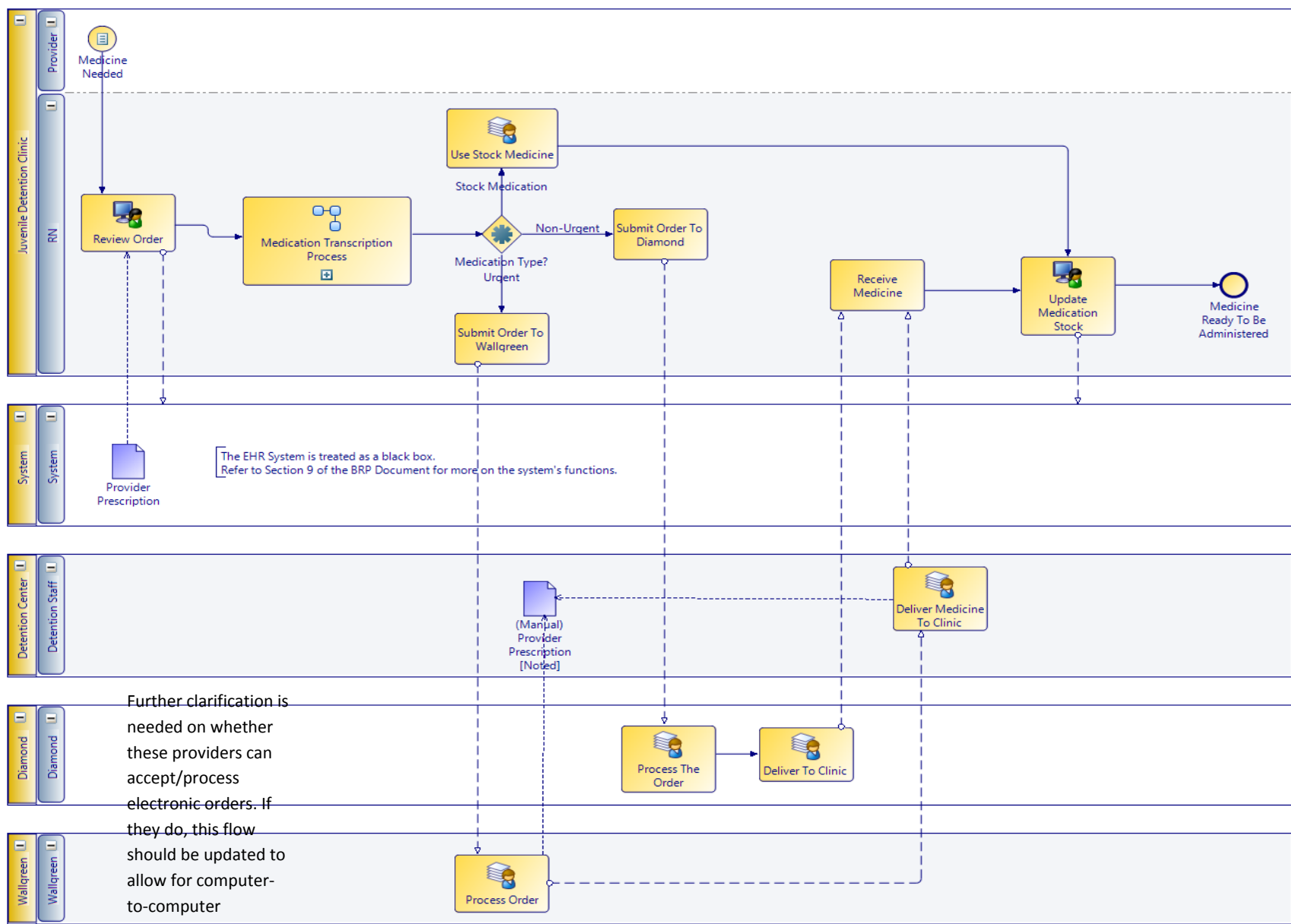


Figure 28: C To-Be P6.4 "Provider Medication Order Process Diagram"



- **Triggering Events/Actions**
 - Medicine prescribed by Psychiatrist.
- **Involved Entities**
 - Juvenile Detention Clinic Psychiatrist
 - Juvenile Detention Clinic Medication RN
 - Juvenile Detention Center Staff
 - Walgreen Pharmacy
 - Diamond Pharmacy
 - CVS Pharmacy
 - Any other entities, not listed above and involved in the following sub-process:
 - Medication Transcription Process
- **Pre-conditions**
 - Juvenile has been evaluated by Provider.
- **Inputs**
 - Provider Prescription
 - ICQ Form – Completed
 - Any other inputs, not listed above, pertaining to the following process:
 - Medication Transcription Process
- **Description**
 - During this process, the process the Clinic RN orders the medication from either Walgreen, CVS, or Diamond pharmacies, depending on the urgency of the medication and the insurance status.
- **Business Rules**
 - In case of Magellan insurance, medications are obtained from CVS Pharmacy
 - Urgent medication for non-insured patients are obtained from Walgreen Pharmacy
- **Calculations – None**
- **Outputs**
 - Provider Prescription – with pharmacy’s noting
 - Any other outputs, not listed above, pertaining to the following process:
 - Medication Transcription Process
- **Post-conditions**
 - The medicine is ready to be administered.

Figure 29: C As-Is P6.5 "Psychiatrist Medication Order Process Diagram"

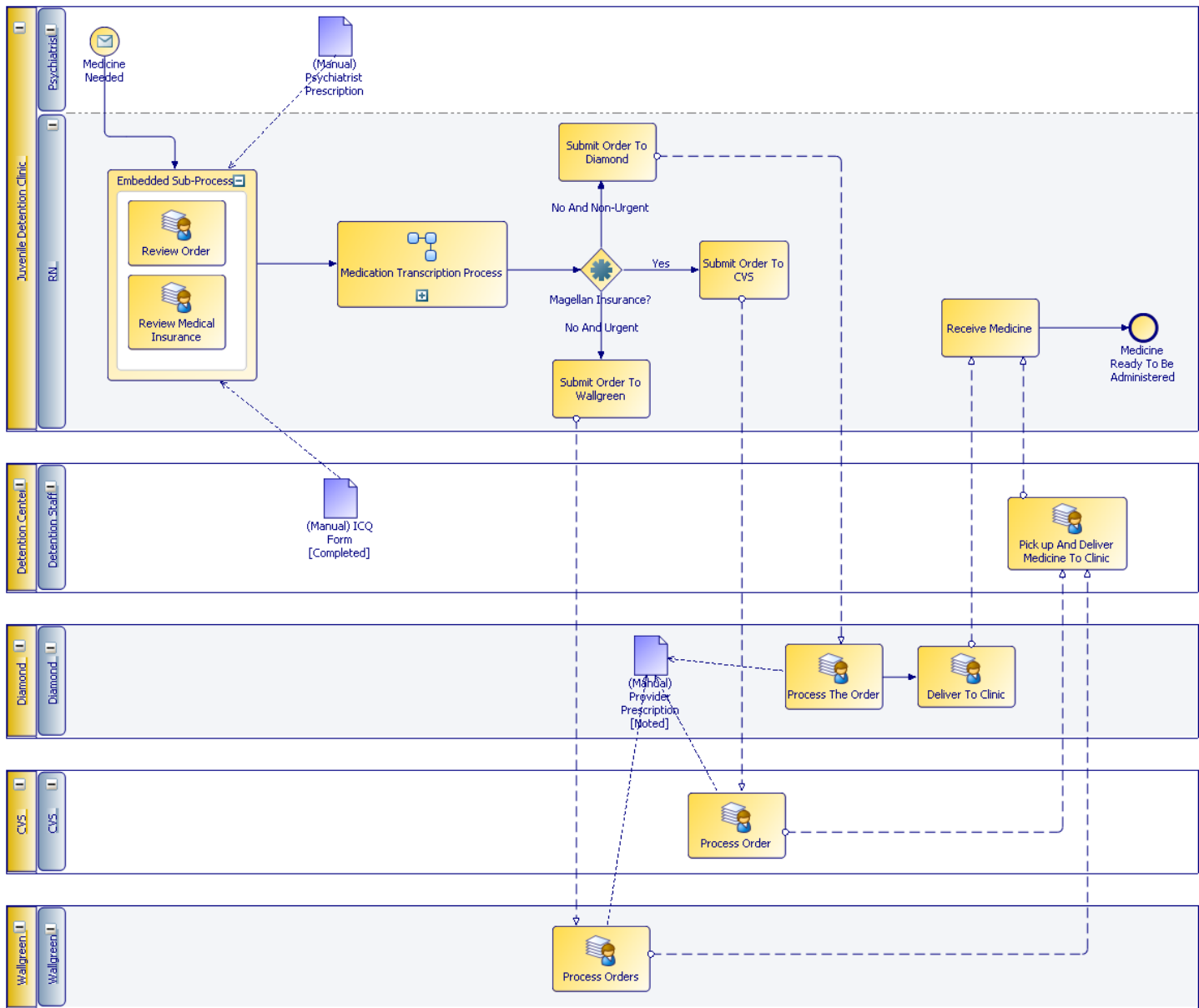
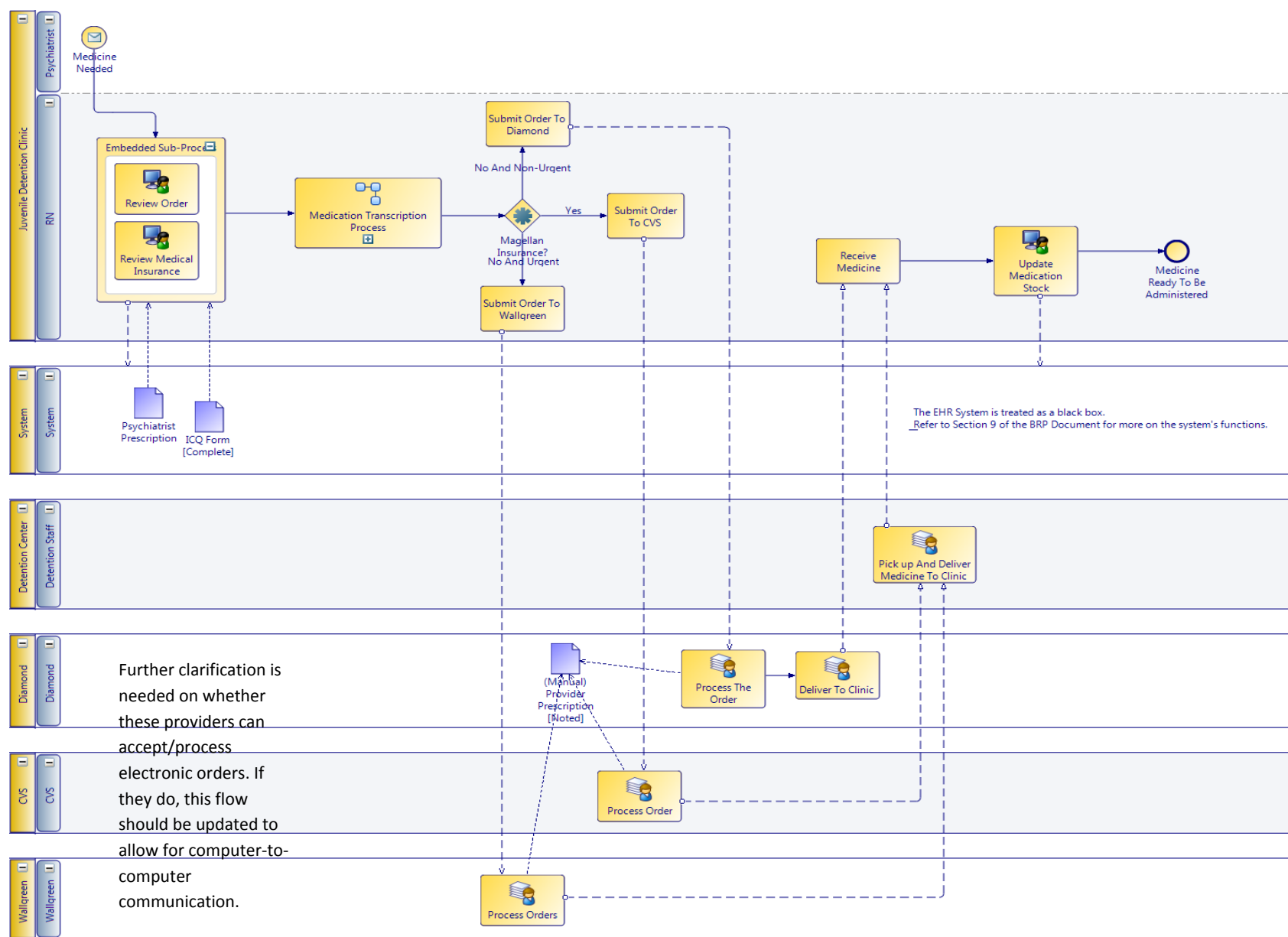


Figure 30: C To-Be P6.5 "Psychiatrist Medication Order Process Diagram"



9.6.6 C P6.6 – DIAMOND MEDICATION ORDER

- **Triggering Events/Actions**
 - Stock Medication has reached a certain Par Level
 - Individual medication has been prescribed by a Provider
- **Involved Entities**
 - Juvenile Detention Clinic Provider
 - Juvenile Detention Clinic Medication RN
 - Diamond Pharmacy
- **Pre-conditions**
 - Juvenile has been evaluated by Provider.
- **Inputs**
 - Provider Prescription
 - Stock Medication Reference Sheet – Blank
 - Stock Medication Sign Out Sheet – Blank
 - Diamond Order Book
 - Juvenile Chart
- **Description**
 - This process describes the steps involved when the Clinic RN orders a medication from Diamond pharmacy.
- **Business Rules**
 - Medicine must not fall below par level.
- **Calculations** – None
- **Outputs**
 - Stock Medication Reference Sheet – Completed
 - Stock Medication Sign Out Sheet – Updated
 - Diamond Order Book – Updated
 - Juvenile Chart – Updated
- **Post-conditions**
 - The medicine is ready to be administered.

Figure 31: CAs-Is P6.6 "Diamond Medication Order Process Diagram"

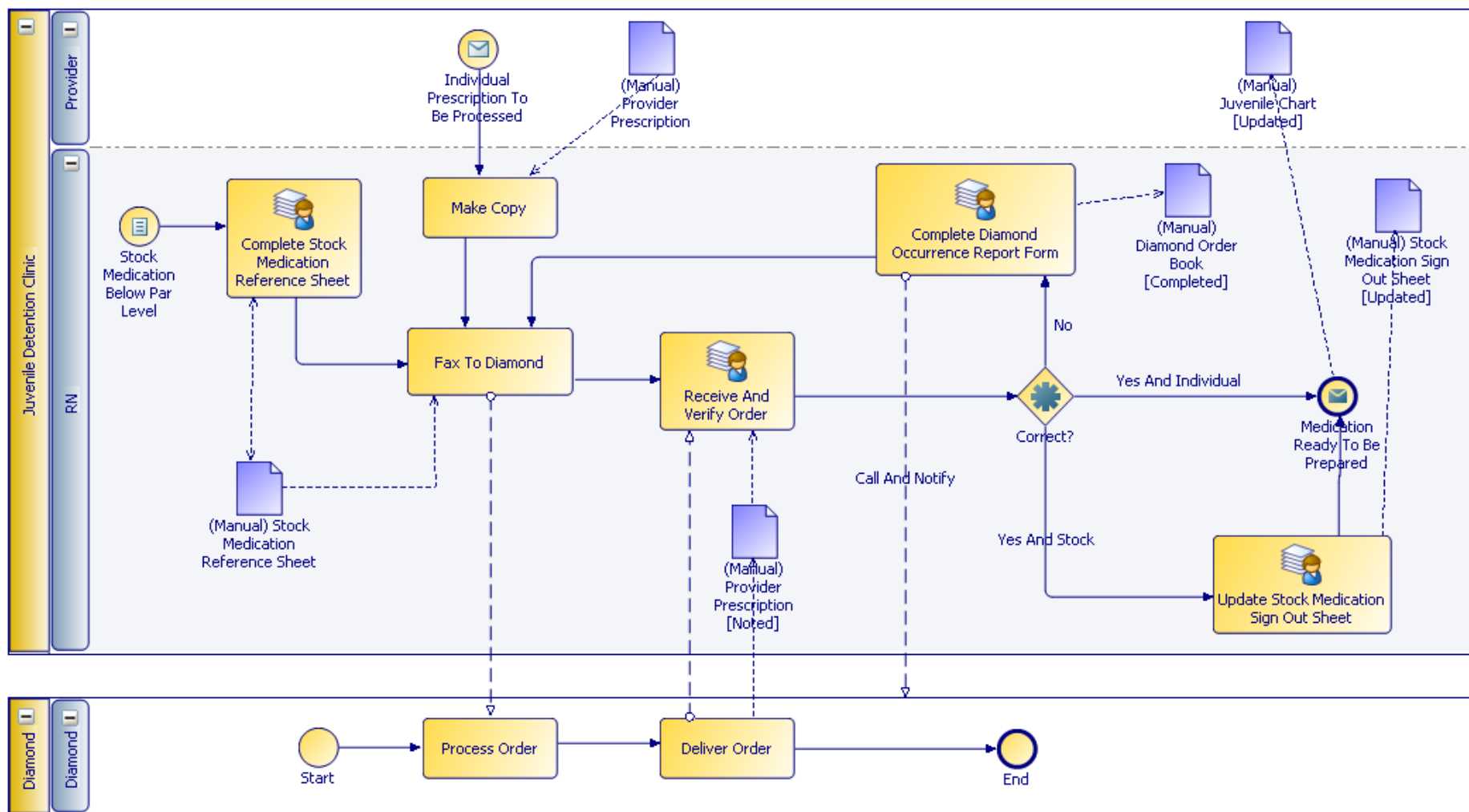
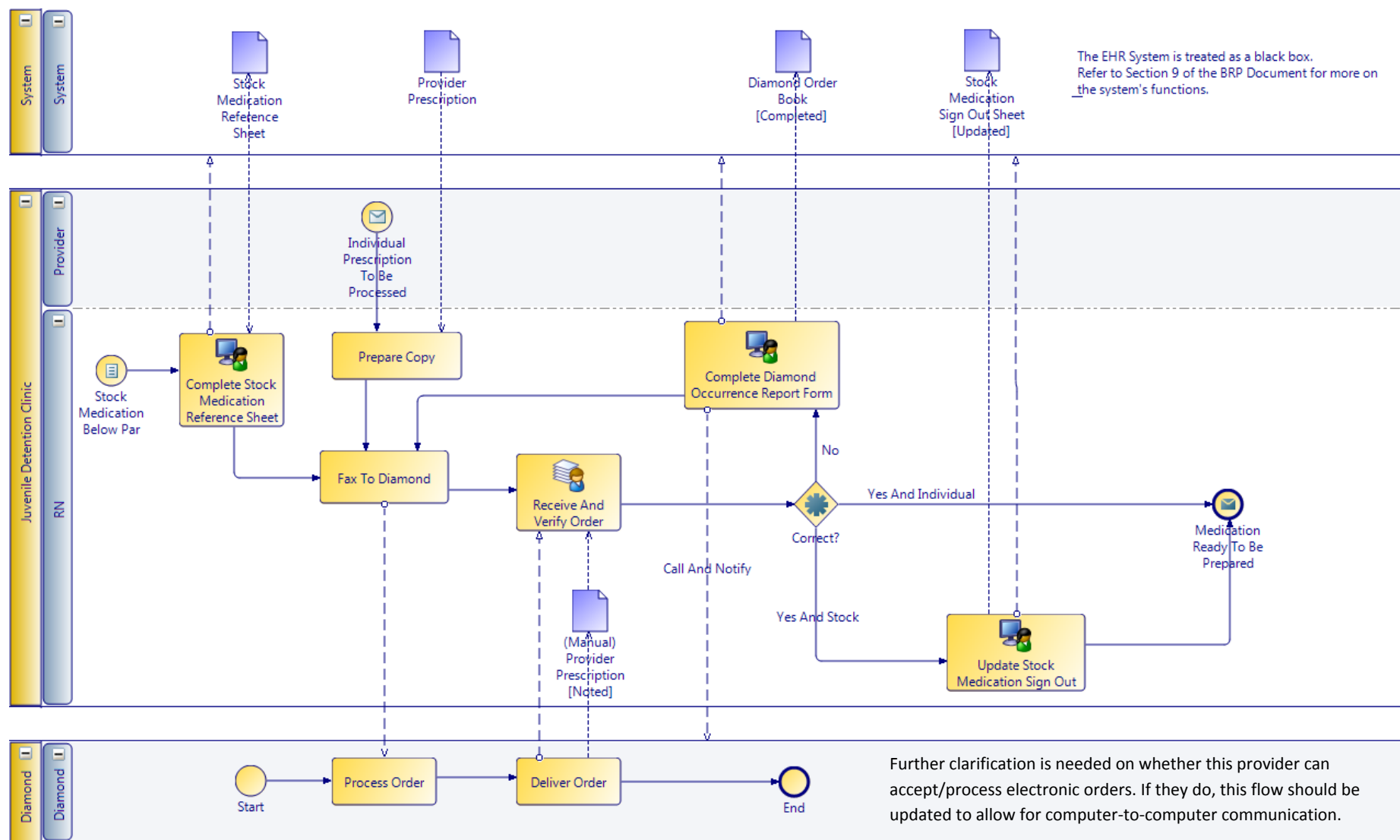


Figure 32: C To-Be P6.6 "Diamond Medication Order Process Diagram"



9.6.7 C P6.7 – MEDICATION PREPARATION

- **Triggering Events/Actions**
 - Medication is to be administered to Juvenile.
- **Involved Entities**
 - Juvenile Detention Clinic RN
- **Pre-conditions**
 - Medication is available in the Clinic.
- **Inputs**
 - MAR
 - Stock Medication Sign Out Sheet
 - Controlled Medication Sign Out Sheet
 - Juvenile Chart
- **Description**
 - During this sub-process, the Clinic RN pours the medication to be administered to Juvenile and documents the administered medication on MAR.
- **Business Rules**
 - For controlled medications, two RNs must count the quantities and both must sign off.
 - For stock medications, only one RN must count and sign off on the quantities.
 - The documentation of stock controlled medications must be maintained for two years.
- **Calculations – NONE**
- **Outputs**
 - Stock Medication Sign Out Sheet – Updated
 - Controlled Medication Sign Out Sheet – Updated
 - Juvenile Chart – Updated
- **Post-conditions**
 - Medication is prepared and ready to be administered to Juvenile.

Figure 33: C-As-Is P6.7 "Medication Preparation Process Diagram"

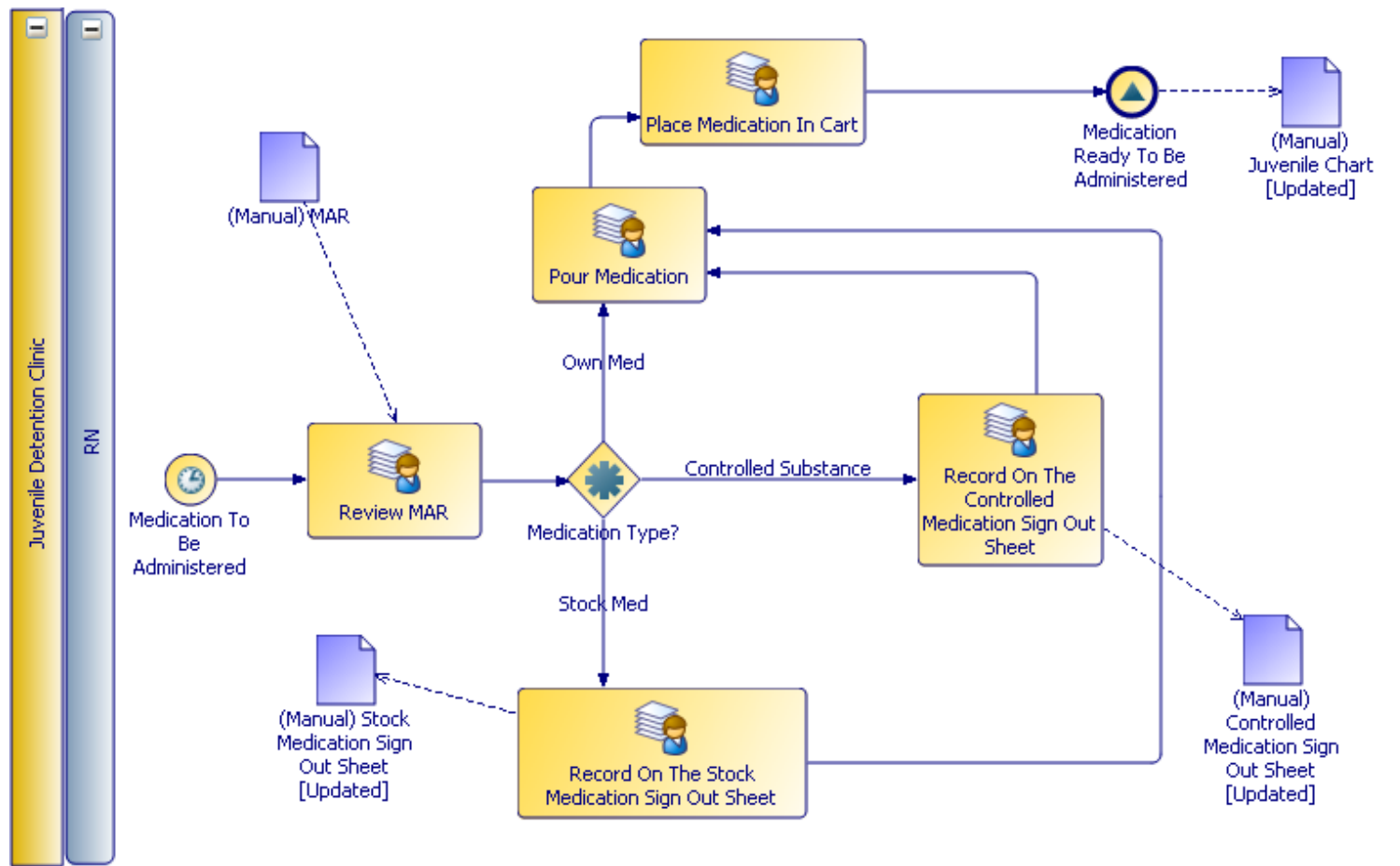
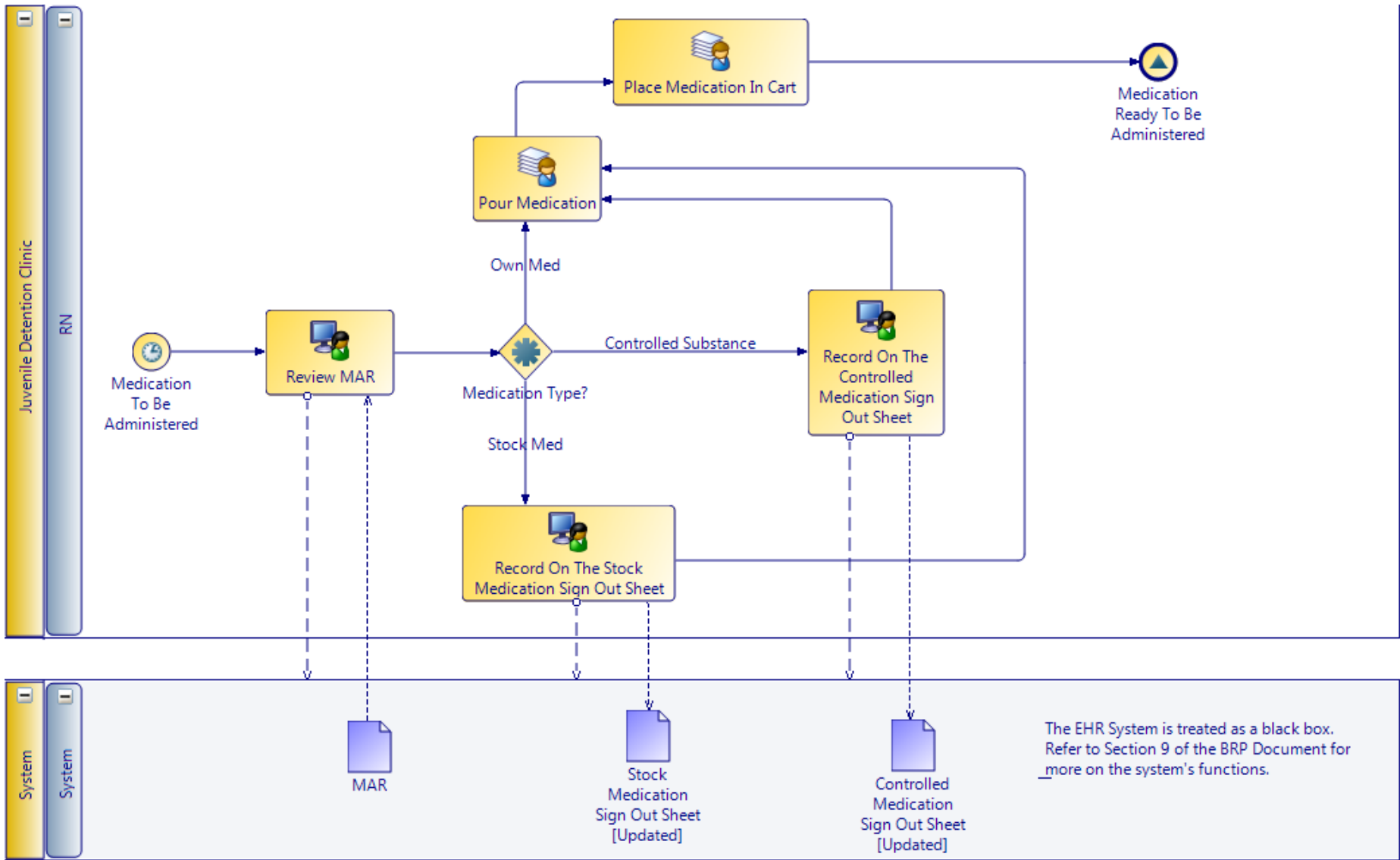
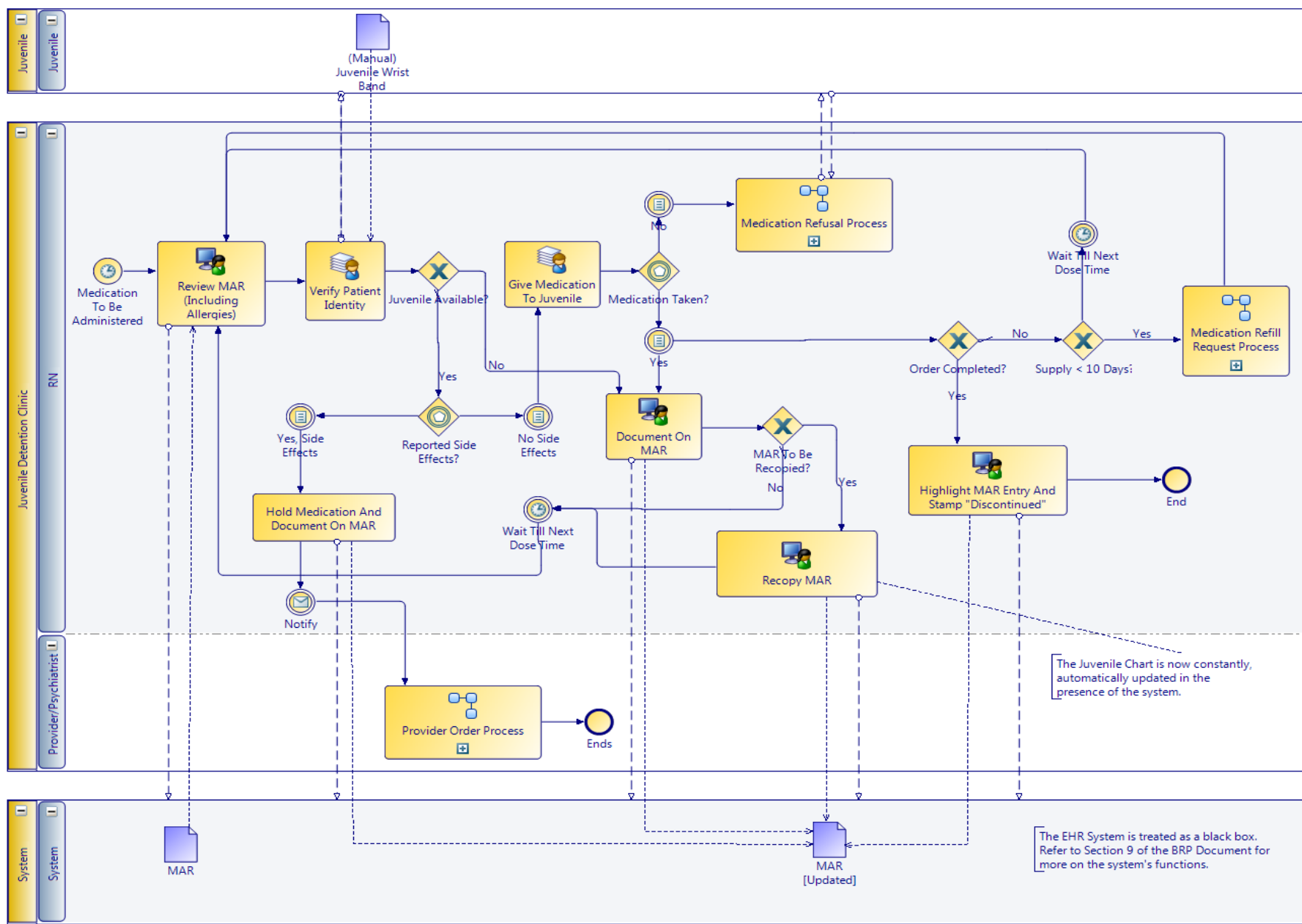


Figure 34: C To-Be P6.7 "Medication Preparation Process Diagram"



- **Triggering Events/Actions**
 - Medication is to be administered to Juvenile.
- **Involved Entities**
 - Juvenile
 - Juvenile Detention Clinic Medication RN
 - Juvenile Detention Clinic Provider
 - Juvenile Detention Clinic Psychiatrist
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Provider Order Process
 - Medication Refusal Process
 - Medication Refill Request Process
- **Pre-conditions**
 - Medication has been poured and is ready to be administered to the Juvenile.
- **Inputs**
 - Juvenile Wrist Band
 - MAR
 - Juvenile Chart
 - Any other inputs, not listed above, pertaining to any of the following processes:
 - Provider Order Process
 - Medication Refusal Process
 - Medication Refill Request Process
- **Description**
 - During this process the Clinic Medication RN administers the medicine to the Juvenile and documents the administered medication on the MAR.
- **Business Rules**
 - Two RNs must go out in the morning to administer the medicine.
 - One RN must administer the medicine in the clinic at lunch time.
 - One RN must go out in the evening to administer the medicine.
- **Calculations** – None
- **Outputs**
 - MAR – Updated
 - Juvenile Chart – Updated
 - Any other outputs, not listed above, pertaining to any of the following processes:
 - Provider Order Process
 - Medication Refusal Process
 - Medication Refill Request Process
- **Post-conditions**
 - Medication has been administered to Juvenile.

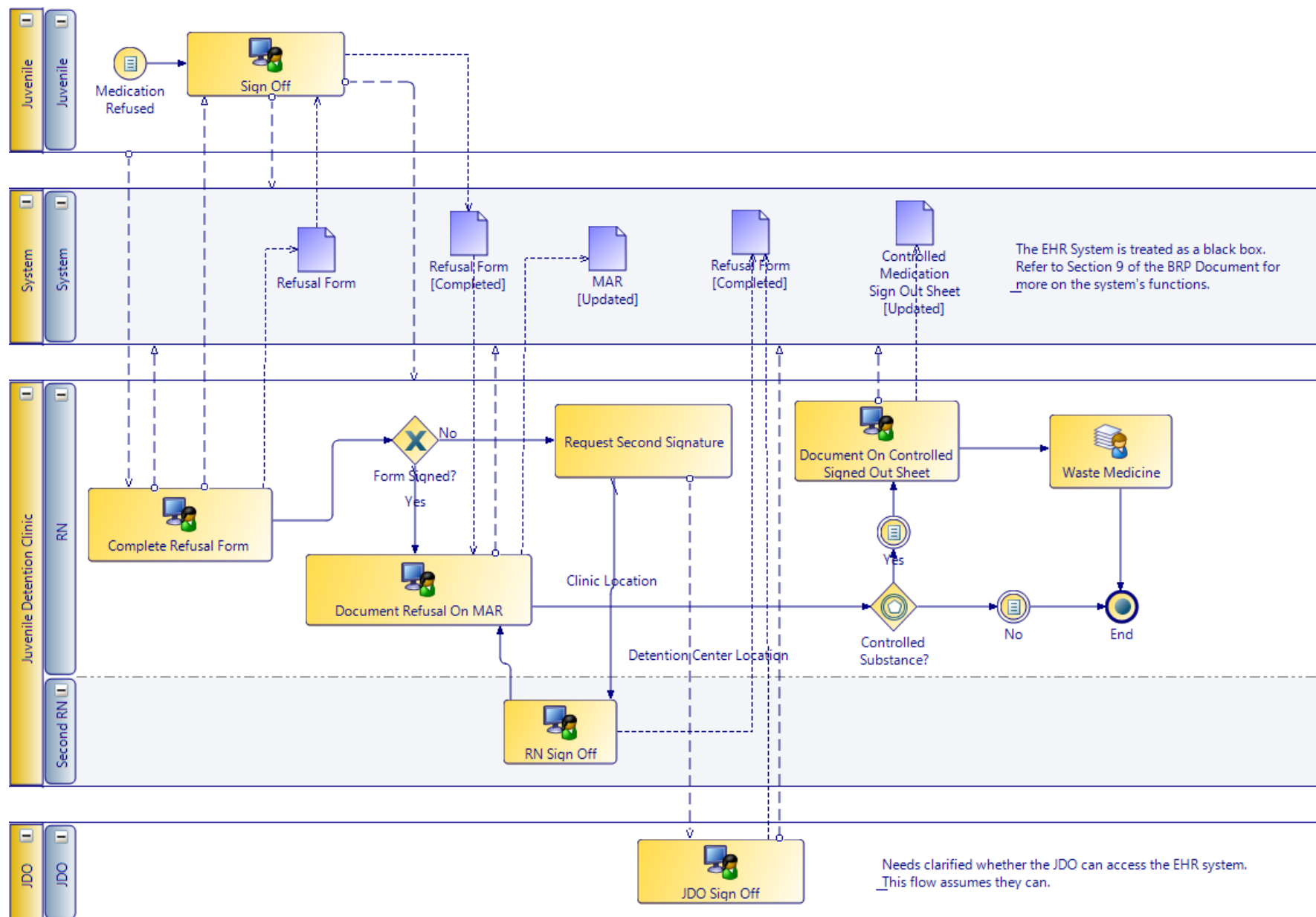
Figure 36: C To-Be P6.8 "Medication Administration Process Diagram"



9.6.8.1 C P6.8.1 – MEDICATION REFUSAL

- **Triggering Events/Actions**
 - Juvenile refuses to take medication.
- **Involved Entities**
 - Juvenile
 - Juvenile Detention Clinic Medication RN
 - Juvenile Detention Clinic Second RN
 - Juvenile Detention Center Officer
- **Pre-conditions**
 - Juvenile is available.
- **Inputs**
 - Refusal Form – Blank
 - MAR
 - Controlled Medication Sign Out Sheet
 - Juvenile Chart
- **Description**
 - During this process the Clinic RN documents every time a Juvenile's refuses to take a medication and notifies the Provider.
- **Business Rules**
 - Two signoffs are required on the Refusal Form
 - The RN
 - Either the Juvenile, the second RN, or the JDO
- **Calculations** – None
- **Outputs**
 - Refusal Form – Completed
 - MAR – Updated
 - Controlled Medication Sign Out Sheet – Updated
 - Juvenile Chart – Updated
- **Post-conditions**
 - Refusal Form is in complete state.
 - Controlled substance medication has been wasted.

Figure 38: C To-Be P6.8.1 "Medication Refusal Process Diagram"



- **Triggering Events/Actions**
 - Juvenile released from custody.
- **Involved Entities**
 - Juvenile Detention Center Officer
 - Guardian
 - Juvenile Detention Clinic Provider
 - Juvenile Detention Clinic RN
 - Any other entities, not listed above and involved in the following sub-process:
 - Provider Order Process
- **Pre-conditions**
 - Juvenile has been under medication.
- **Inputs**
 - Medication Inventory Form
 - MAR
 - Stock Medication Sign Out Sheet
 - Controlled Medication Sign Out Sheet
 - Medication For Release Form – Blank
 - Juvenile Chart
 - Any other inputs, not listed above, pertaining to the following process:
 - Provider Order Process
- **Description**
 - The Clinic RN collects the medications to be given to guardian and obtains guardian's signature, documenting receipt of medications.
- **Business Rules**
 - Guardian's signature is required in the Medication Inventory Form and the Medication For Release Form.
- **Calculations** – None
- **Outputs**
 - Medication Inventory Form – Updated
 - MAR – Updated
 - Stock Medication Sign Out Sheet – Updated
 - Controlled Medication Sign Out Sheet – Completed
 - Medication For Release Form – Completed
 - Juvenile Chart – Updated
 - Any other outputs, not listed above, pertaining to the following process:
 - Provider Order Process
- **Post-conditions**
 - Medication has been released to the Guardian.

Figure 39: C As-Is P6.9 "Medication Release Process Diagram"

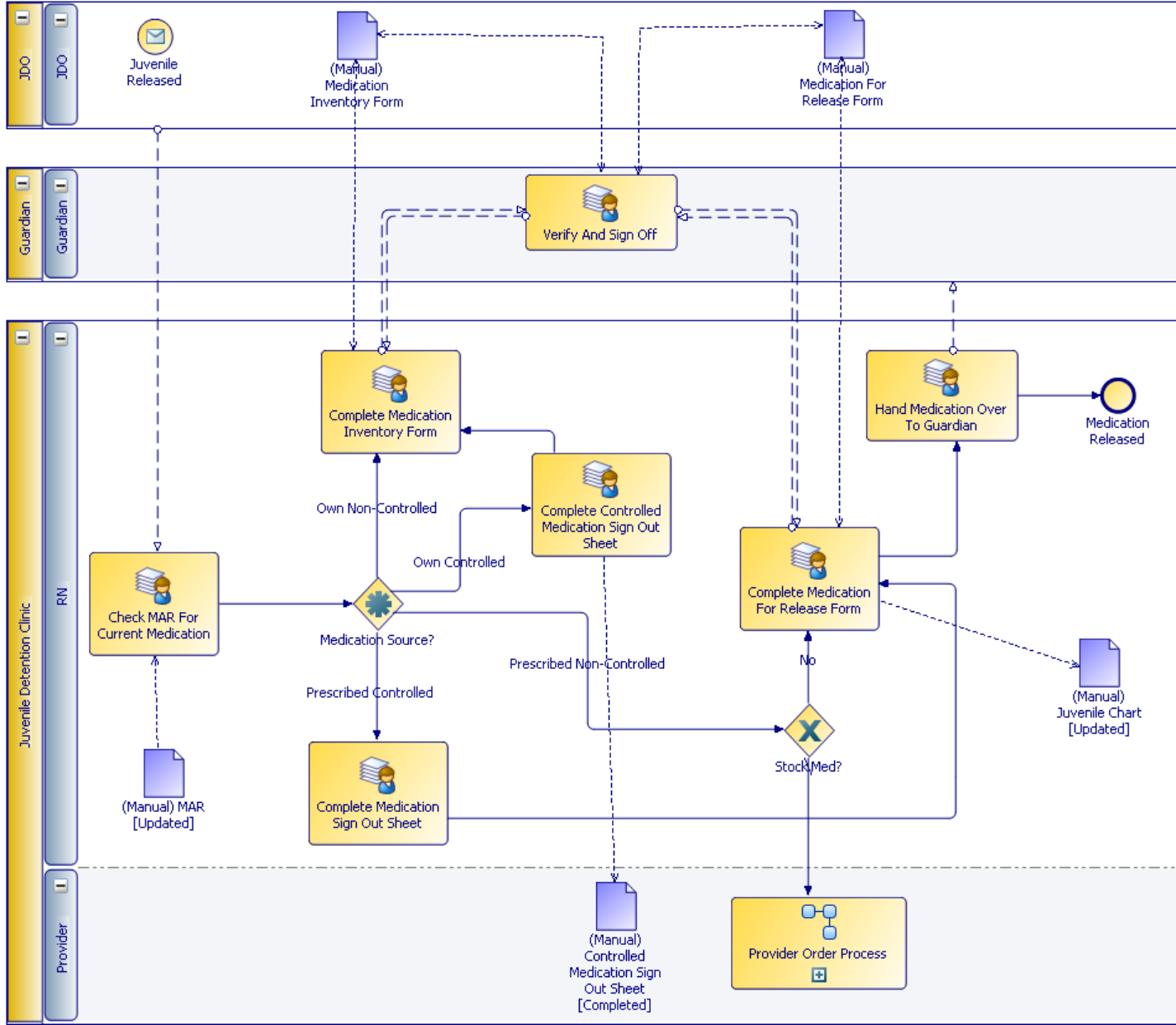
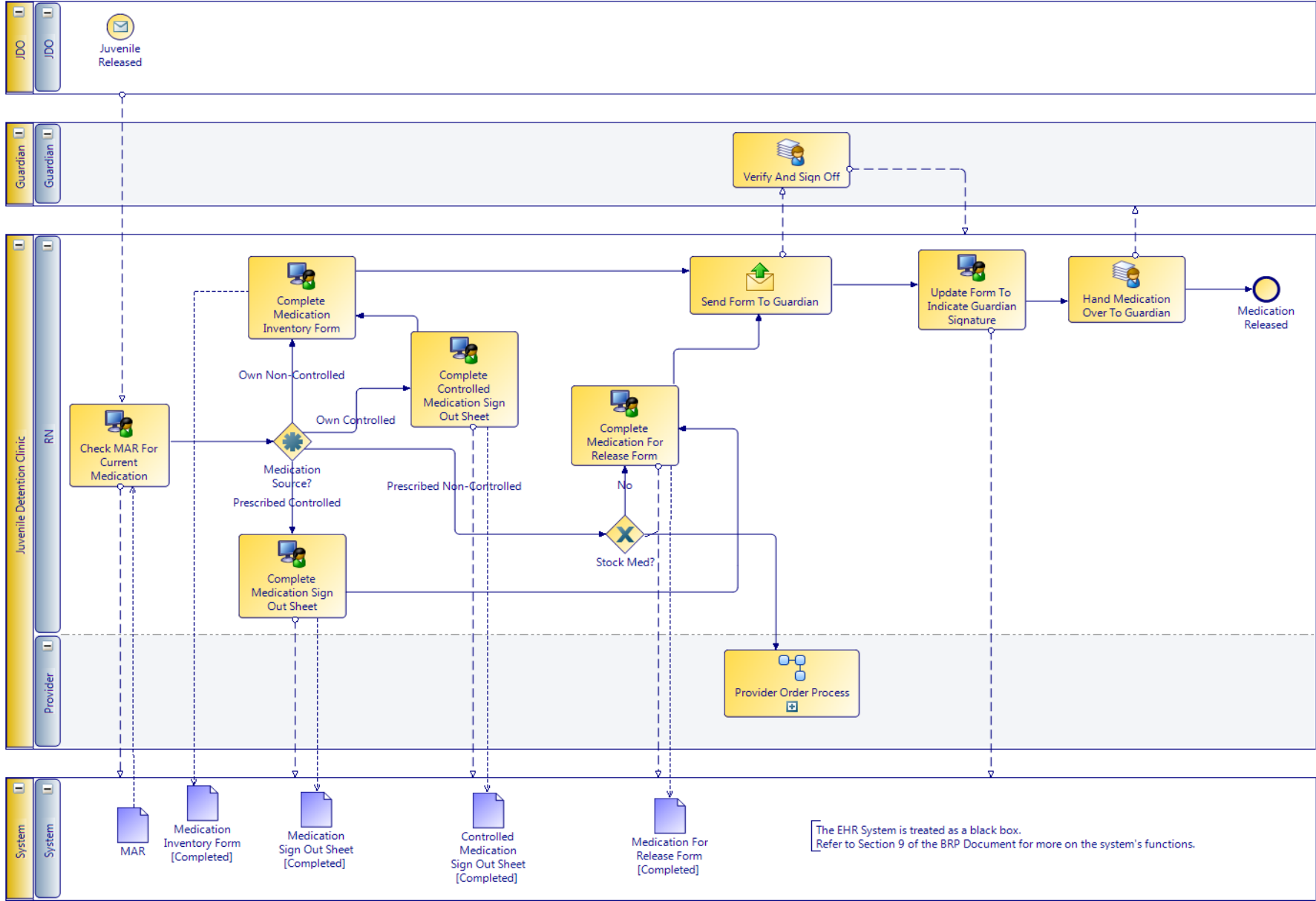


Figure 40: C To-Be P6.9 "Medication Release Process Diagram"



- **Triggering Events/Actions**
 - Juvenile has condition or treatment need that cannot be handled by the Clinic.
- **Involved Entities**
 - Any entities involved in either of the following sub-processes:
 - ER Referral Process
 - Sub-Specialty Appointments Process
 - Continuity Of Care Sub-Specialty Visits Process
 - Release Of Medical Information Process
 - Crisis Referral Process
 - Dietary Referral Process
 - Provider Initiated Referrals Process
 - Internal Communication/Exchanges Process
- **Pre-conditions**
 - Any preconditions pertaining to any of the sub-processes listed below apply:
 - ER Referral Process
 - Sub-Specialty Appointments Process
 - Continuity Of Care Sub-Specialty Visits Process
 - Release Of Medical Information Process
 - Crisis Referral Process
 - Dietary Referral Process
 - Provider Initiated Referrals Process
 - Internal Communication/Exchanges Process
- **Inputs**
 - Any inputs pertaining to any of the following sub-processes:
 - ER Referral Process
 - Sub-Specialty Appointments Process
 - Continuity Of Care Sub-Specialty Visits Process
 - Release Of Medical Information Process
 - Crisis Referral Process
 - Dietary Referral Process
 - Provider Initiated Referrals Process
 - Internal Communication/Exchanges Process
- **Description**
 - The activities pertaining to the Referral service have been grouped into an External Referral processes and an Internal Referral processes.
- **Business Rules**
 - Any business rules pertaining to any of the sub-processes listed below apply:
 - ER Referral Process
 - Sub-Specialty Appointments Process
 - Continuity Of Care Sub-Specialty Visits Process

- Release Of Medical Information Process
- Crisis Referral Process
- Dietary Referral Process
- Provider Initiated Referrals Process
- Internal Communication/Exchanges Process
- **Calculations – NONE**
- **Outputs**
 - Any outputs pertaining to any of the following sub-processes:
 - ER Referral Process
 - Sub-Specialty Appointments Process
 - Continuity Of Care Sub-Specialty Visits Process
 - Release Of Medical Information Process
 - Crisis Referral Process
 - Dietary Referral Process
 - Provider Initiated Referrals Process
 - Internal Communication/Exchanges Process
- **Post-conditions**
 - Any post conditions pertaining to any of the sub-processes listed below apply:
 - ER Referral Process
 - Sub-Specialty Appointments Process
 - Continuity Of Care Sub-Specialty Visits Process
 - Release Of Medical Information Process
 - Crisis Referral Process
 - Dietary Referral Process
 - Provider Initiated Referrals Process
 - Internal Communication/Exchanges Process

Figure 41: CAs-Is P7 “Medication Referrals Processes Diagram”



- **Triggering Events/Actions**
 - Juvenile is in need of urgent/emergent care.
- **Involved Entities**
 - Juvenile Detention Center Supervisor
 - Juvenile Detention Clinic RN
 - Juvenile Detention Clinic Provider
 - Juvenile Detention Clinic HUC
 - ICQ Department Staff
 - Emergency Room Staff
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Provider Order Process
 - Admitted Patient Utilization Review Process
 - Non-Admitted Patient Utilization Review Process
- **Pre-conditions**
 - Juvenile examination has been initiated
- **Inputs**
 - Provider Order Sheet
 - Consultation Request Form (CRF)
 - Alternative Payer Consultation Request Form
 - ICQ Form
 - Consultation Review Form
 - ER Medical Records
 - Provider Sick Call Roster
 - Provider Sick Call Binder
 - Nurse Assessment Form
 - Juvenile Chart
 - Any other inputs, not listed above, pertaining to the following process:
 - Provider Order Process
 - Admitted Patient Utilization Review Process
 - Non-Admitted Patient Utilization Review Process
- **Description**
 - Any urgent/emergent condition requiring further evaluation and treatment has been identified and referred to the Emergency Room.
- **Business Rules – NONE**
- **Calculations – NONE**
- **Outputs**
 - Consultation Request Form (CRF) – Completed
 - Alternative Payer Consultation Request Form – Completed
 - Consultation Review Form – Completed
 - ER Medical Records – Completed

- ICQ Form – Completed
 - Provider Sick Call Roster – Updated
 - Provider Sick Call Binder – Updated
 - Nurse Assessment Form — Completed
 - Juvenile Chart – Updated
 - Any other outputs, not listed above, pertaining to the following process:
 - Provider Order Process
 - Admitted Patient Utilization Review Process
 - Non-Admitted Patient Utilization Review Process
- **Post-conditions**
 - Juvenile urgent medical needs, if any, are identified and processed

Figure 42: CAs-Is P7.1 "ER Referrals Process Diagram"

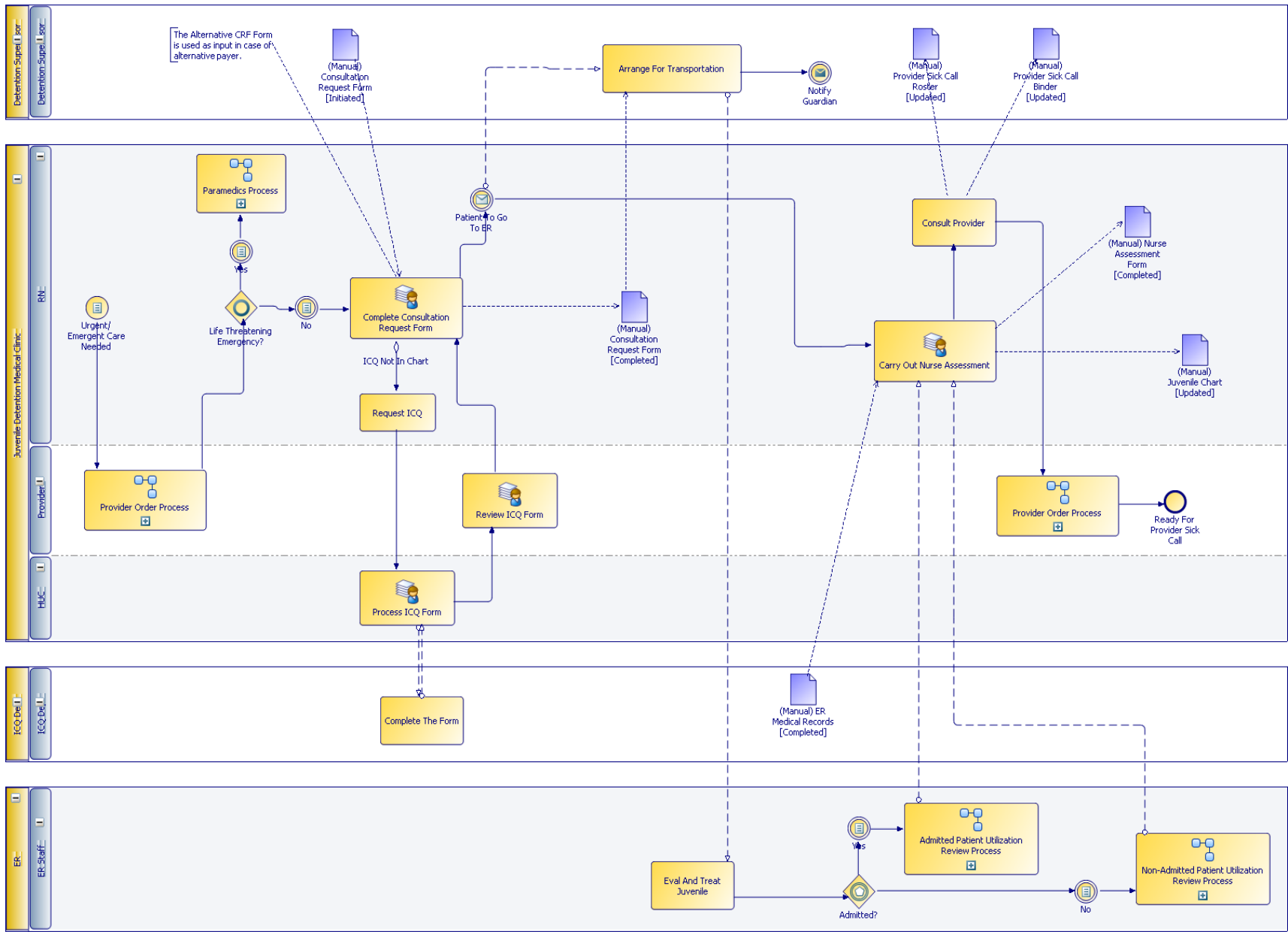
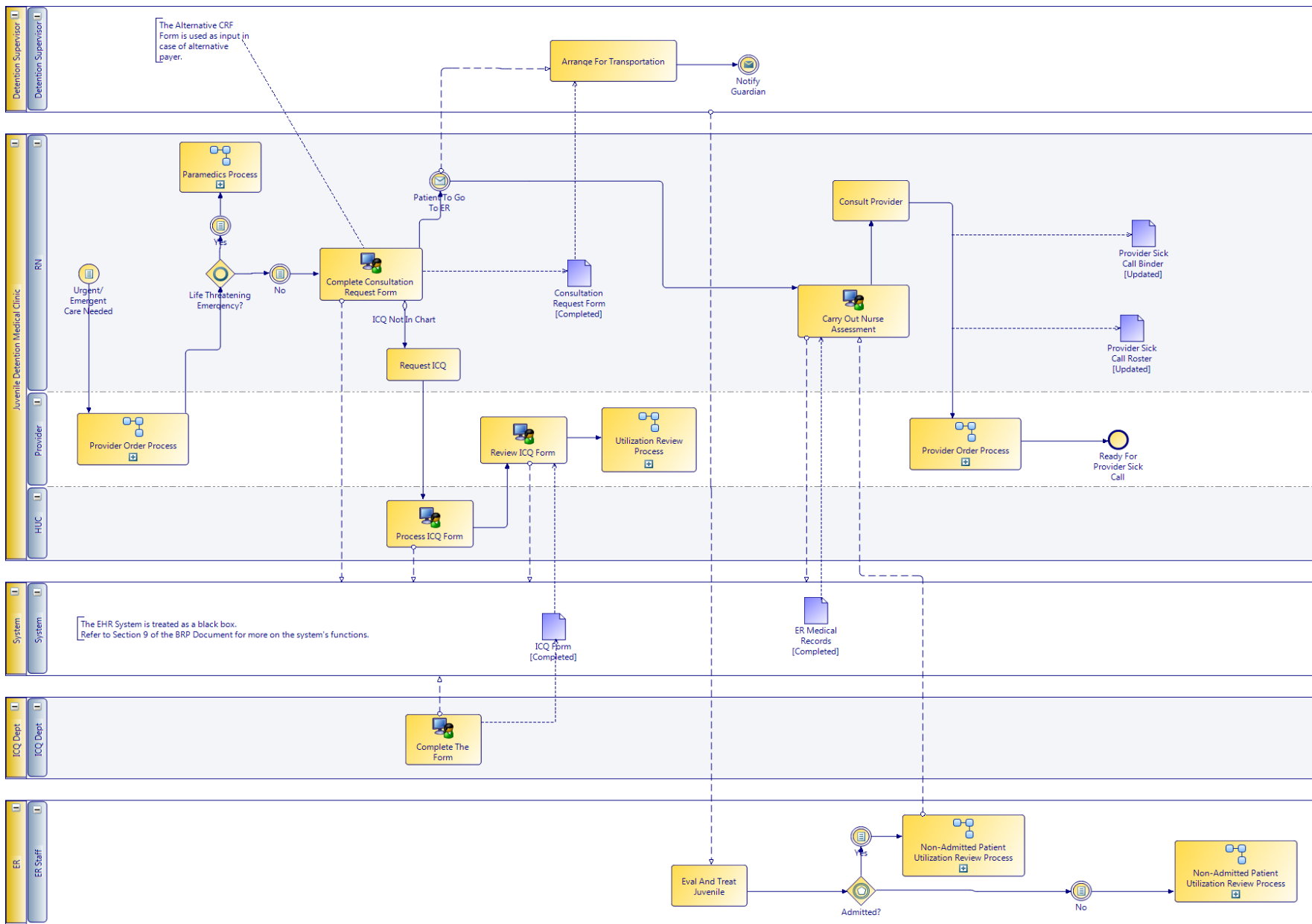


Figure 43: C To-Be P7.1 "ER Referrals Process Diagram"



- **Triggering Events/Actions**
 - Juvenile has a condition (non urgent/emergent) that cannot be handled by the Clinic.
- **Involved Entities**
 - Juvenile Detention Clinic Provider
 - Juvenile Detention Clinic HUC
 - Access Database
 - Court Wide Web System (CWWS)
 - Scheduling Department Staff
 - ICQ Department Staff
 - Juvenile Transportation Department Staff
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Provider Order Process
- **Pre-conditions**
 - Juvenile examination has been initiated
- **Inputs**
 - Consultation Request Form (CRF)
 - Alternative Payer Consultation Request Form
 - ICQ Form
 - Consultation Review Form
 - Transportation Temporary Release Form
 - Juvenile Chart
 - Any other inputs, not listed above, pertaining to the following process:
 - Provider Order Process
- **Description**
 - When sub-specialty services are needed, an appointment is made at the sub-specialty clinic for further evaluation and treatment.
- **Business Rules – NONE**
- **Calculations – NONE**
- **Outputs**
 - Consultation Request Form (CRF) – Completed
 - Alternative Payer Consultation Request Form – Completed
 - ICQ Form – Completed
 - Consultation Review Form – Completed
 - Transportation Temporary Release Form – Completed
 - Juvenile Chart – Updated
 - Any other inputs, not listed above, pertaining to the following process:
 - Provider Order Process
- **Post-conditions**
 - All arrangements for the Juvenile outside appointment have been completed.

Figure 44: C As-Is P7.2 "Sub-Specialty Process Diagram"

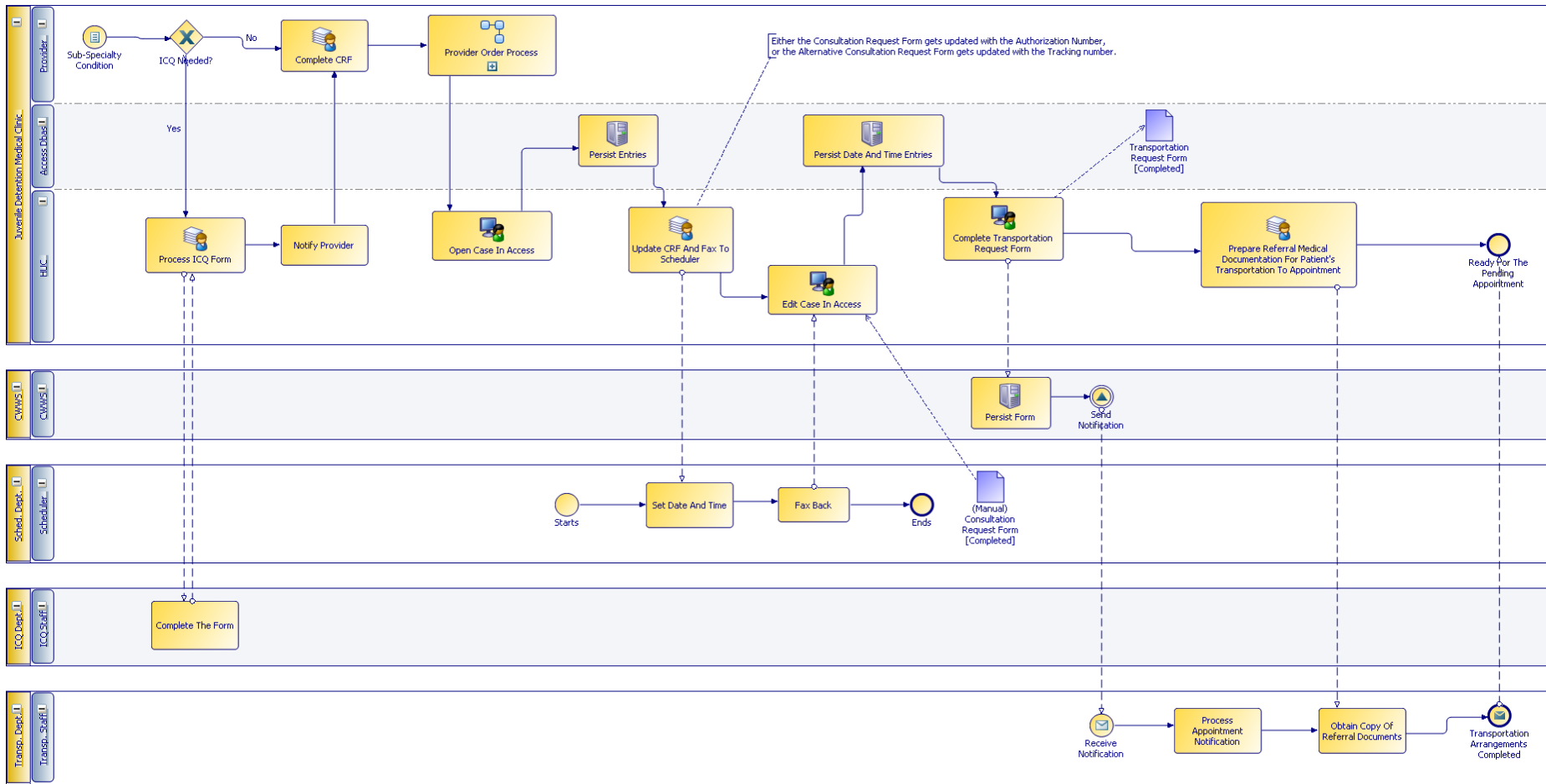
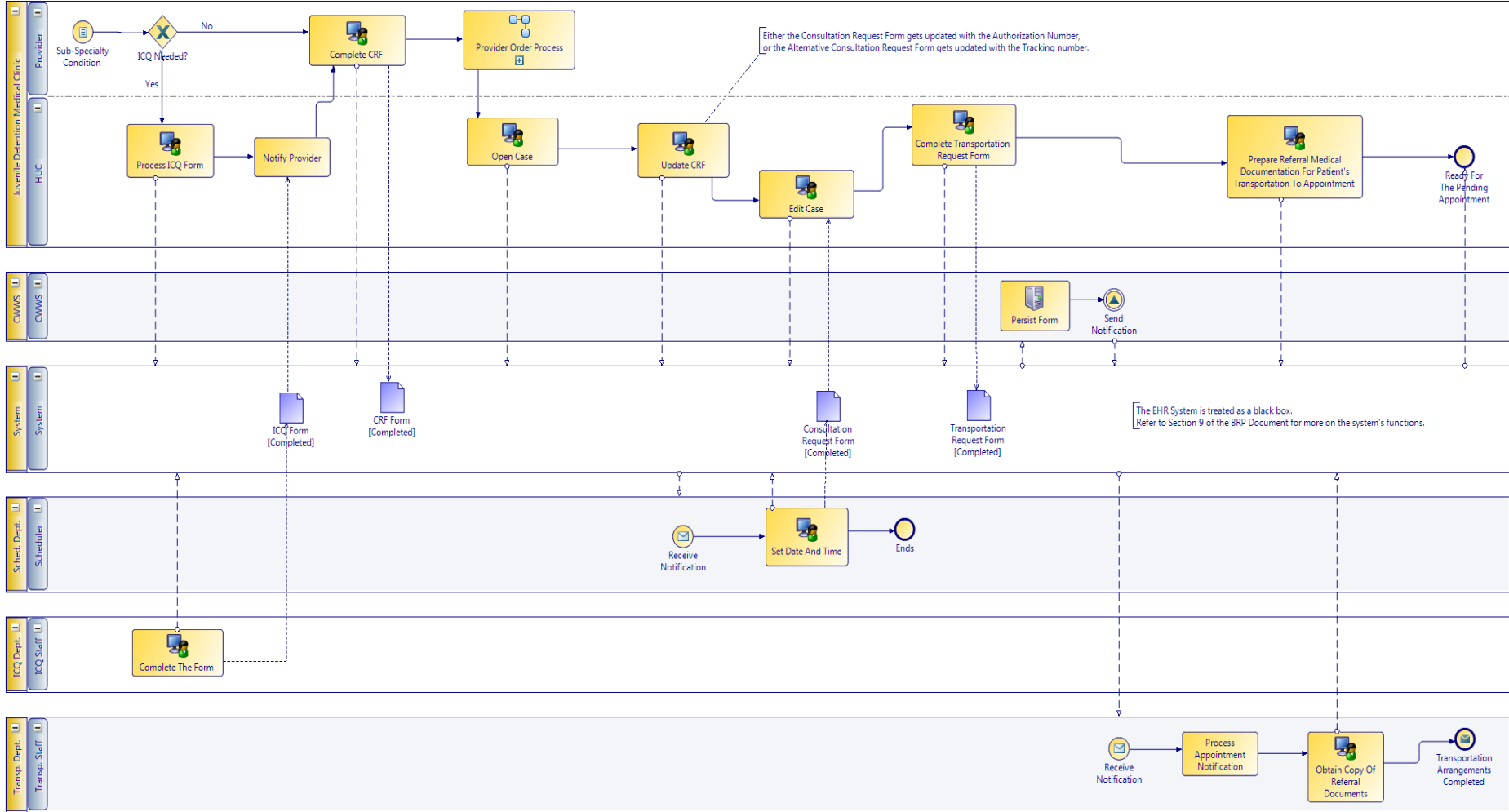


Figure 45: C To-Be P7.2 "Sub-Specialty Process Diagram"



9.7.3 C P7.3 – CONTINUITY OF CARE SUB-SPECIALTY VISITS

- **Triggering Events/Actions**
 - Juvenile's appointment time.
- **Involved Entities**
 - Medical Facility Physician
 - Juvenile Detention Clinic Provider
 - Juvenile Detention Clinic RN
 - Juvenile Detention Clinic HUC
 - Juvenile Detention Clinic UR (Utilization Review) Nurse
 - Access Database
 - Juvenile Transportation Department Staff
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Request Continuity Of Care Records Process
 - Provider Order Process
 - Pre-Visit Sub-Specialty Appointment Process
- **Pre-conditions**
 - Juvenile Pre-Visit Sub-Specialty process has been completed.
- **Inputs**
 - Consultation Review Form
 - Transportation Temporary Release Form
 - Service Provider Medical Records – Completed
 - Nurse Assessment Form
 - Provider Sick Call Roster
 - Juvenile Chart
 - Any other inputs, not listed above, pertaining to the following process:
 - Request Continuity Of Care Records Process
 - Provider Order Process
 - Pre-Visit Sub-Specialty Appointment Process
- **Description**
 - Juvenile is transported along with Medical Records to a sub-specialty appointment at the Maricopa Medical Center.
 - Medical services are provided to the Juvenile
 - Juvenile is transported back to the Juvenile Detention Facility, along with any orders, treatment plans, or other information from the sub-specialty appointment.
 - Juvenile is seen by the Provider for continuity of care and the Provider completes a Consultation Review Form.
 - The Access database is updated by the HUC.
 - If the MCJPD is the (primary or secondary) party responsible for the payment of medical services rendered, an email is generated and sent from the UR Nurse to CHS
 - If further consultations are necessary, the Sub-Specialty Appointment process is initiated.
- **Business Rules – NONE**

- **Calculations** – NONE
- **Outputs**
 - Consultation Review Form – Completed
 - Nurse Assessment Form – Completed
 - Provider Sick Call Roster – Updated
 - Email to CHS (Correctional Health Services) – Sent
 - Juvenile Chart – Updated
 - Any other outputs, not listed above, pertaining to the following process:
 - Request Continuity Of Care Records Process
 - Provider Order Process
 - Pre-Visit Sub-Specialty Appointment Process
- **Post-conditions**
 - Juvenile has received external Medical Services as ordered.

Figure 46: C As-Is P7.3 "Continuity Of Care Sub-Specialty Visits Process Diagram"

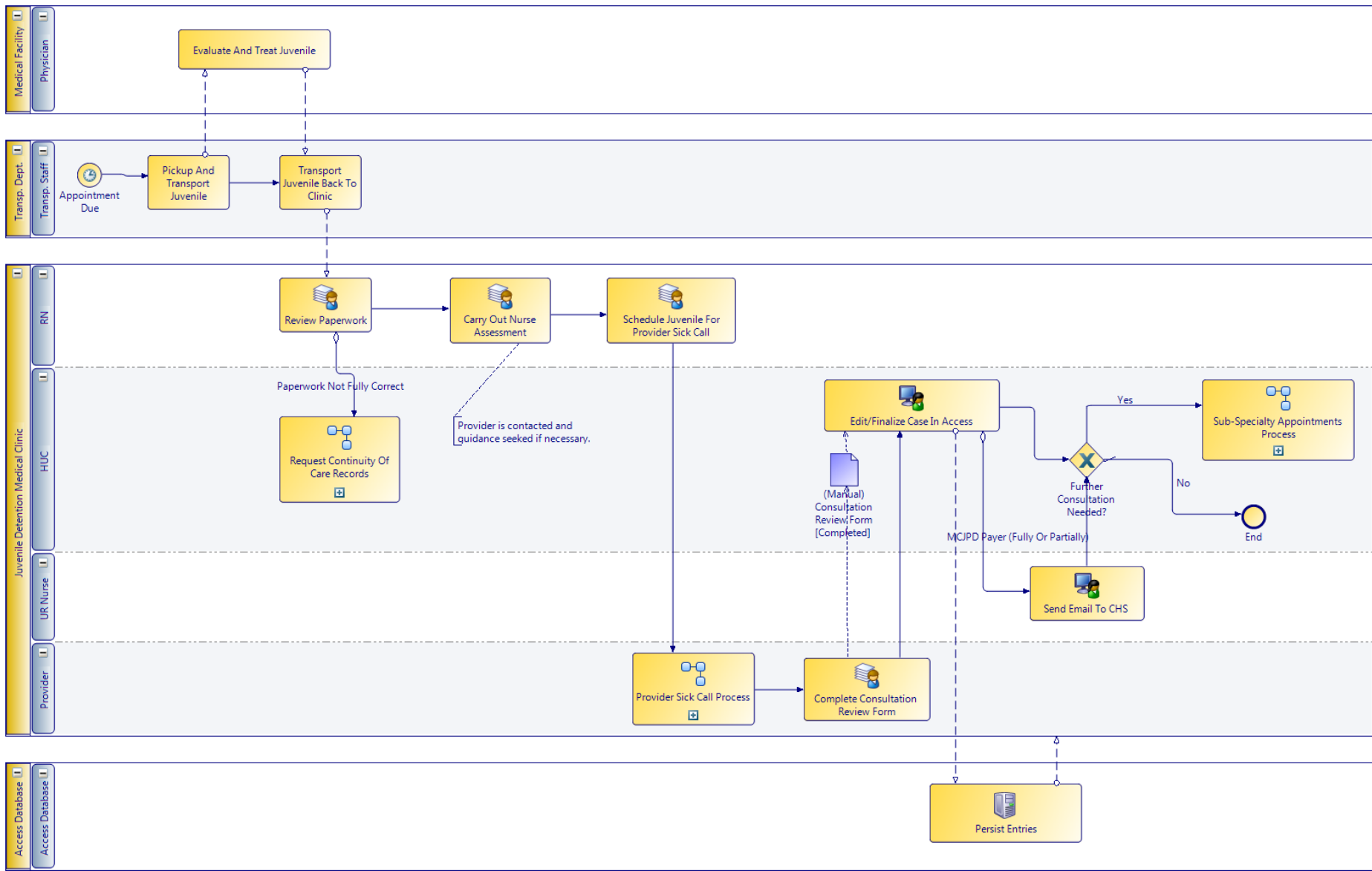
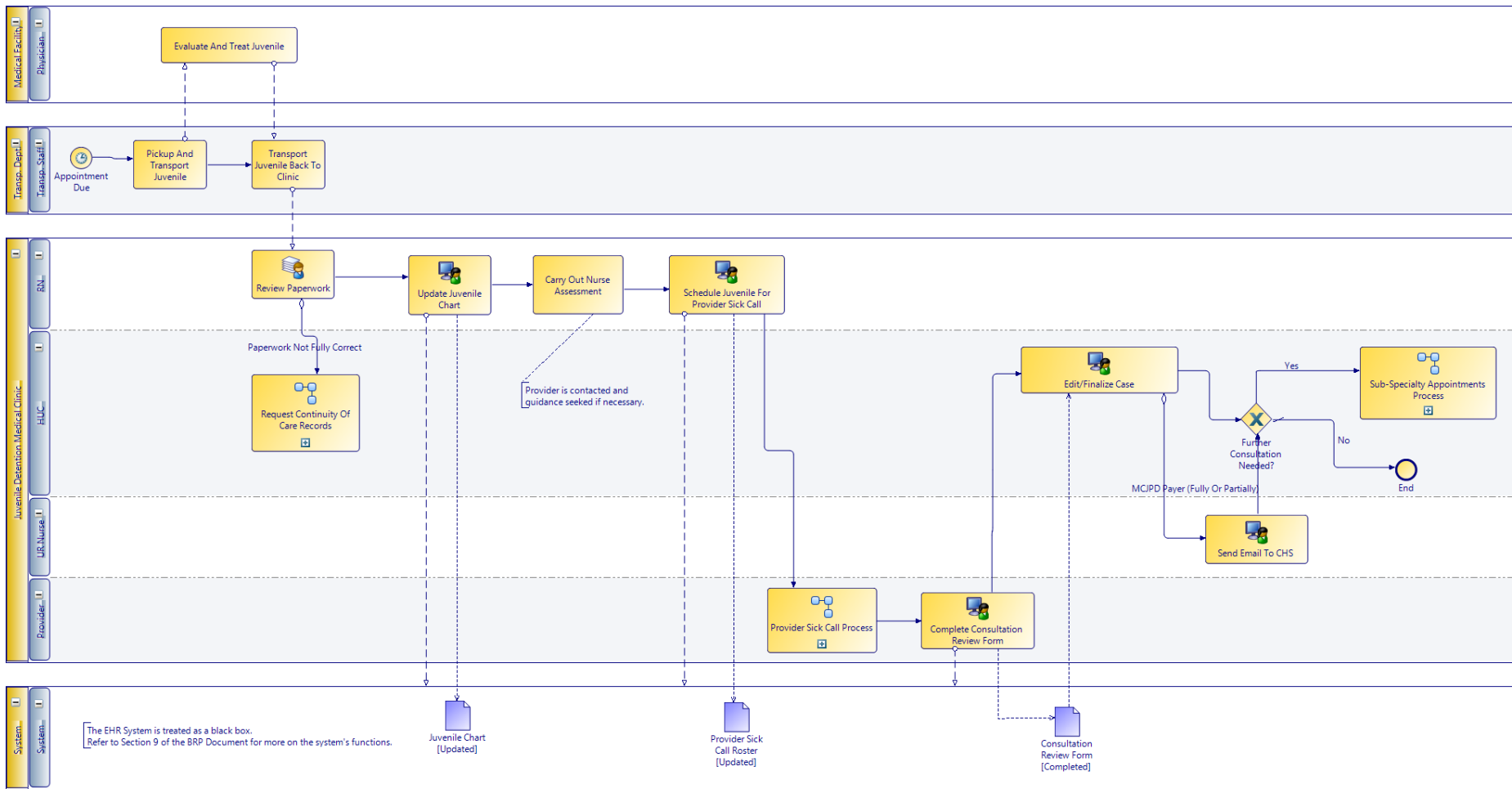


Figure 47: C To-Be P7.3 "Continuity Of Care Sub-Specialty Visits Process Diagram"



9.7.4 C P7.4 – RELEASE OF MEDICAL INFORMATION

- **Triggering Events/Actions**
 - The Clinic receives a request for release of Juvenile related medical information.
- **Involved Entities**
 - Juvenile
 - Requesting Party
 - Juvenile Detention Clinic HUC
 - Guardian
- **Pre-conditions**
 - The Clinic possesses medical information on the Juvenile.
- **Inputs**
 - Authorization For Release Of Medical Information Form
 - Juvenile Chart
 - Relevant Medical Documentation On The Juvenile
- **Description**
 - During this process the Clinic's HUC arranges for the delivery of medical information on the Juvenile to the requesting party.
- **Business Rules**
 - Per HIPPA rules, either the Guardian, or the Juvenile must sign the Authorization For Release Of Medical Information Form
 - In cases of pregnancy or STI, only the Juvenile can sign the Release of Medical Information Form.
- **Calculations – NONE**
- **Outputs**
 - Authorization For Release Of Medical Information Form
 - Juvenile Chart
 - Relevant Medical Documentation On The Juvenile
- **Post-conditions**
 - The requested information has been released in compliance with HIPPA rules.

Figure 48: C As-Is P7.4 "Release Of Medical Information Process Diagram"

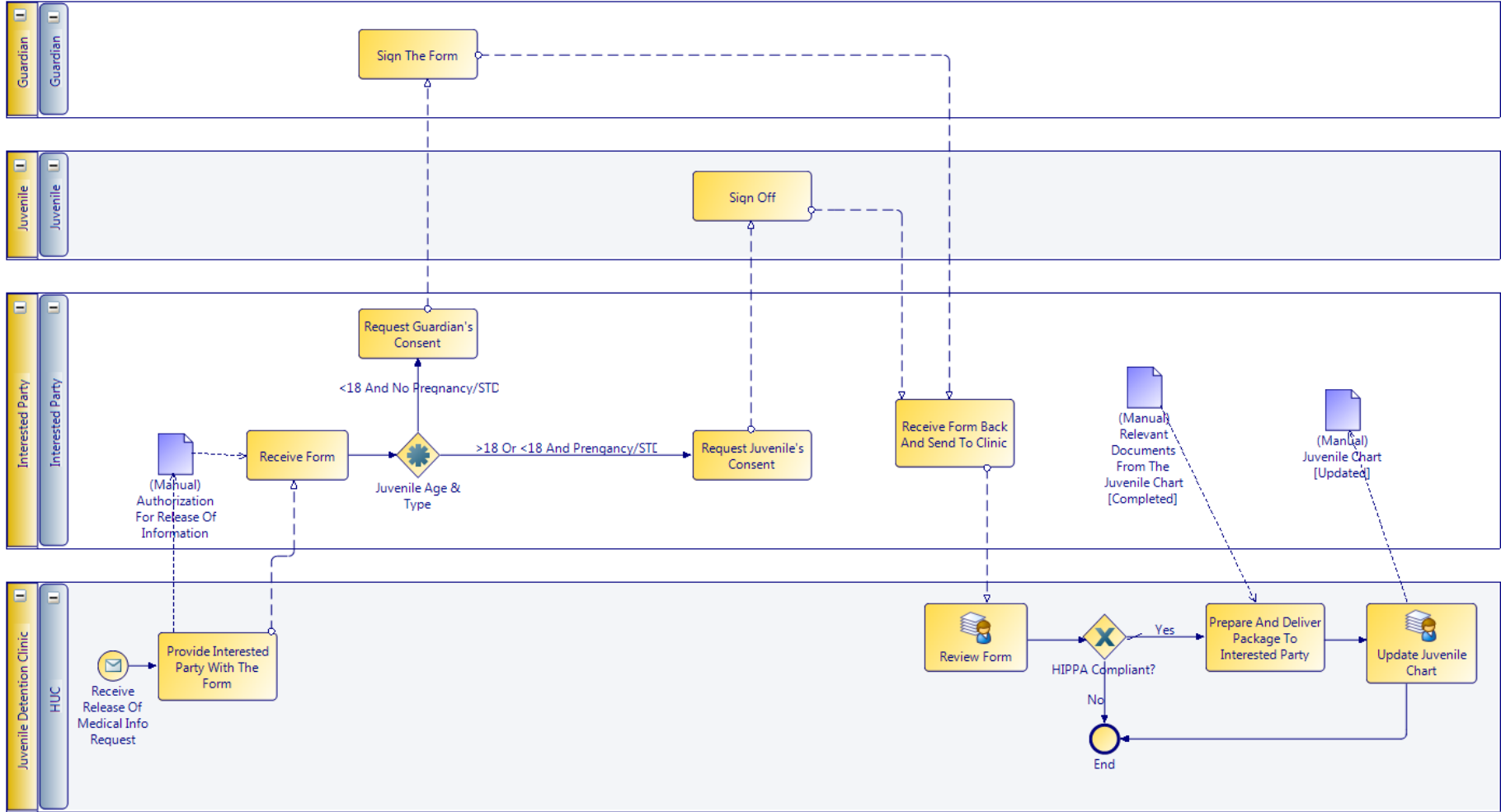
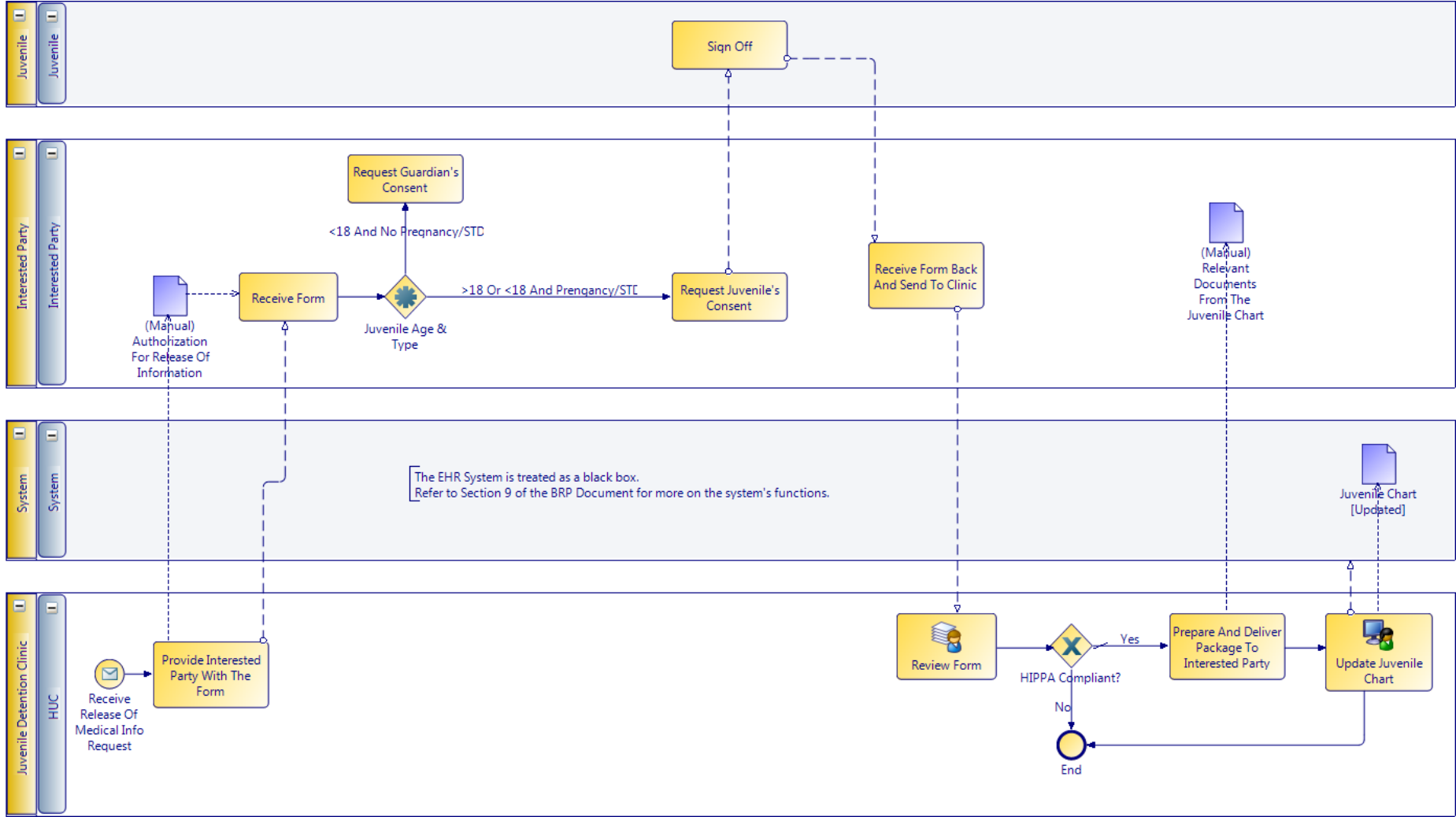


Figure 49: C To-Be P7.4 "Release Of Medical Information Process Diagram"



- **Triggering Events/Actions**
 - Juvenile has revealed current intentions/thoughts of harming themselves or others.
- **Involved Entities**
 - Detention Housing Unit Staff
 - Guardian
 - Juvenile Detention Clinic RN
 - Court Wide Web System (CWWS)
 - Detention Counseling and Psychological Services (DCPS)
- **Pre-conditions**
 - Either of the following has been completed:
 - Health Appraisal Process
 - Nurse Sick Call Process
 - Provider Order Process
- **Inputs**
 - Health Appraisal Form
 - Nurse Assessment Form
 - Provider Order
 - CWWS Form
 - Mental Health Recommendation Form
 - Juvenile Chart
- **Description**
 - During this process the Clinic RN refers the Juvenile for psychological counseling to the DCPS Department.
- **Business Rules**
 - A printout copy of the email, sent from the RN to DCPS, is filed in the Juvenile Chart.
 - The Detention Housing Unit staff must sign the Mental Health Recommendation Form when it is received.
- **Calculations – NONE**
- **Outputs**
 - CWWS Form – Completed
 - Mental Health Recommendation Form – Completed
 - Juvenile Chart – Updated
- **Post-conditions**
 - Juvenile is scheduled to be treated by DCPS
 - Mental Health Recommendation Form has been completed and filed in the Juvenile's Medical Chart.

Figure 50: C As-Is P7.5 "Crisis Referral Process Diagram"

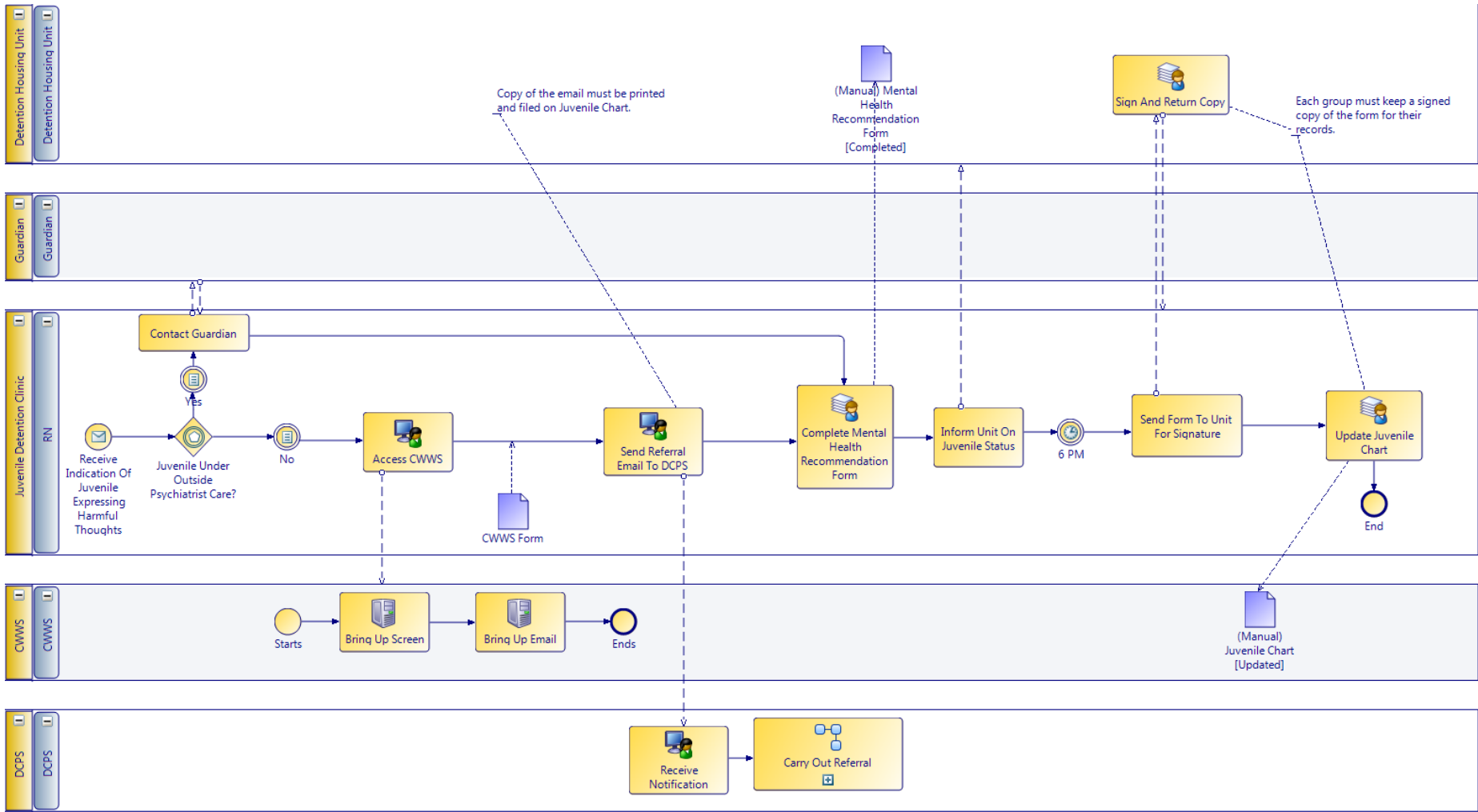
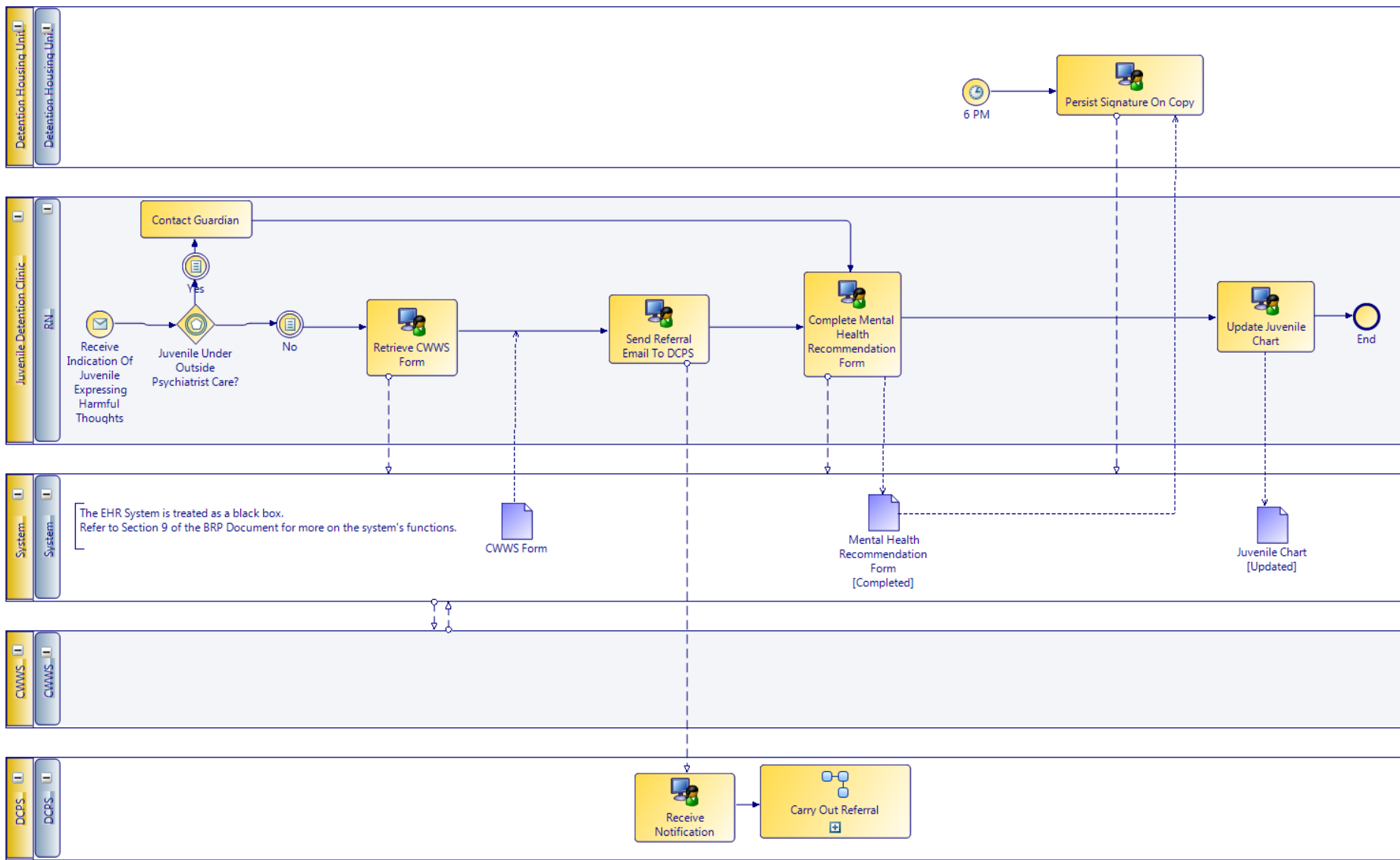


Figure 51: C To-Be P7.5 "Crisis Referral Process Diagram"



9.7.6 C P7.6 – DIETARY REFERRAL

- **Triggering Events/Actions**
 - Juvenile has a food allergy condition.
- **Involved Entities**
 - Detention Housing Unit Staff
 - Detention Dietary Staff
 - Guardian
 - Juvenile Detention Clinic RN
 - Juvenile Detention Clinic Provider
- **Pre-conditions**
 - Either of the following has been completed:
 - Health Screening Process
 - Nurse Sick Call Process
 - Nurse Intake Process
- **Inputs**
 - Nurse Assessment Form
 - Modified Diet Order
 - Peanut Allergy Education Sheet
 - Juvenile Chart
- **Description**
 - Juvenile’s special diet, if any, are processed during this process.
- **Business Rules** – NONE
- **Calculations** – NONE
- **Outputs**
 - Modified Diet Order – Completed
 - Juvenile Chart – Updated
- **Post-conditions**
 - Dietary treatment has been arranged for the Juvenile.

Figure 52: C As-Is P7.6 "Dietary Referral Process Diagram"

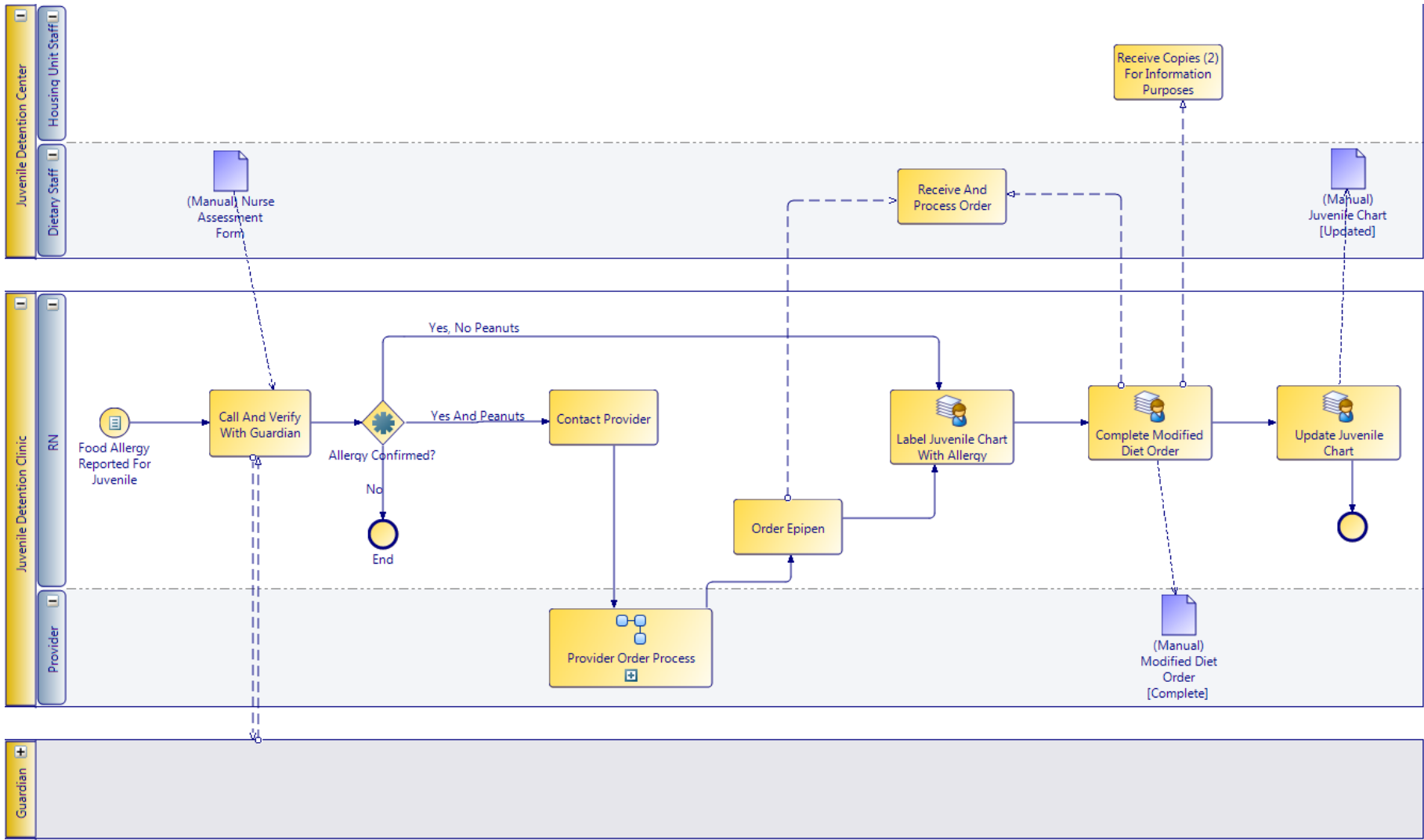
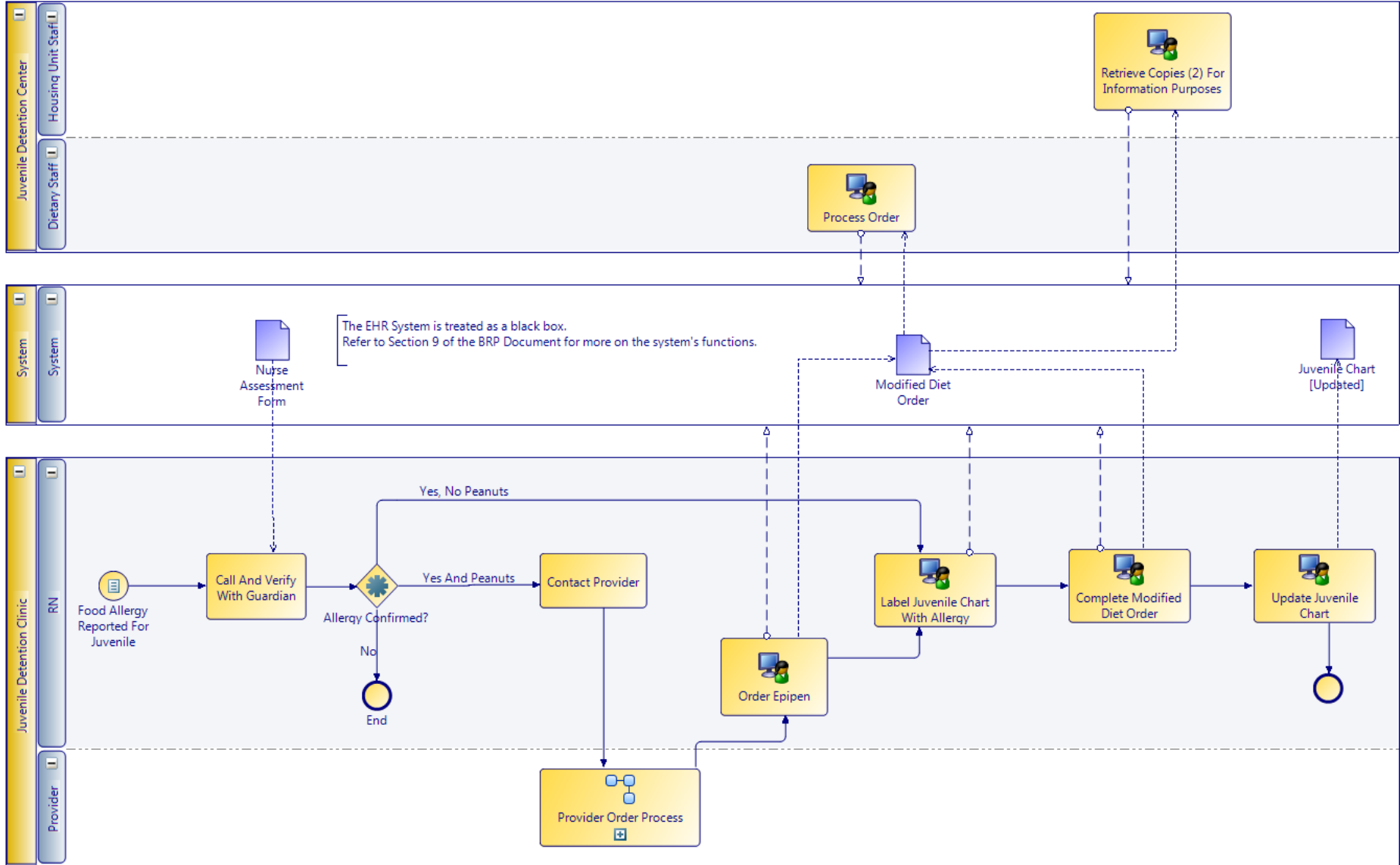


Figure 53: C To-Be P7.6 "Dietary Referral Process Diagram"



9.7.7 C P7.7 – PROVIDER INITIATED REFERRAL

- **Triggering Events/Actions**
 - Juvenile needs additional services as determined by the Provider.
- **Involved Entities**
 - Juvenile Detention Clinic RN
 - Juvenile Detention Clinic Provider
 - Juvenile Probation Officer
 - Detention Counseling and Psychological Services (DCPS)
- **Pre-conditions**
 - Provider Order process has been initiated.
- **Inputs**
 - Psychiatrist Referral Form
 - Juvenile Chart
- **Description**
 - During this process, additional services, as determined by the Provider, are arranged for the Juvenile. Grieving, substance abuse, anger, etc. are among the conditions which may trigger a referral.
- **Business Rules – NONE**
- **Calculations – NONE**
- **Outputs**
 - Psychiatrist Referral Form – Completed
 - Email to DCPS
 - Email to JPO
 - Juvenile Chart – Updated
- **Post-conditions**
 - The required treatment has been arranged for the Juvenile.

Figure 54: CAs-Is P7.7 "Provider Initiated Referrals Process Diagram"

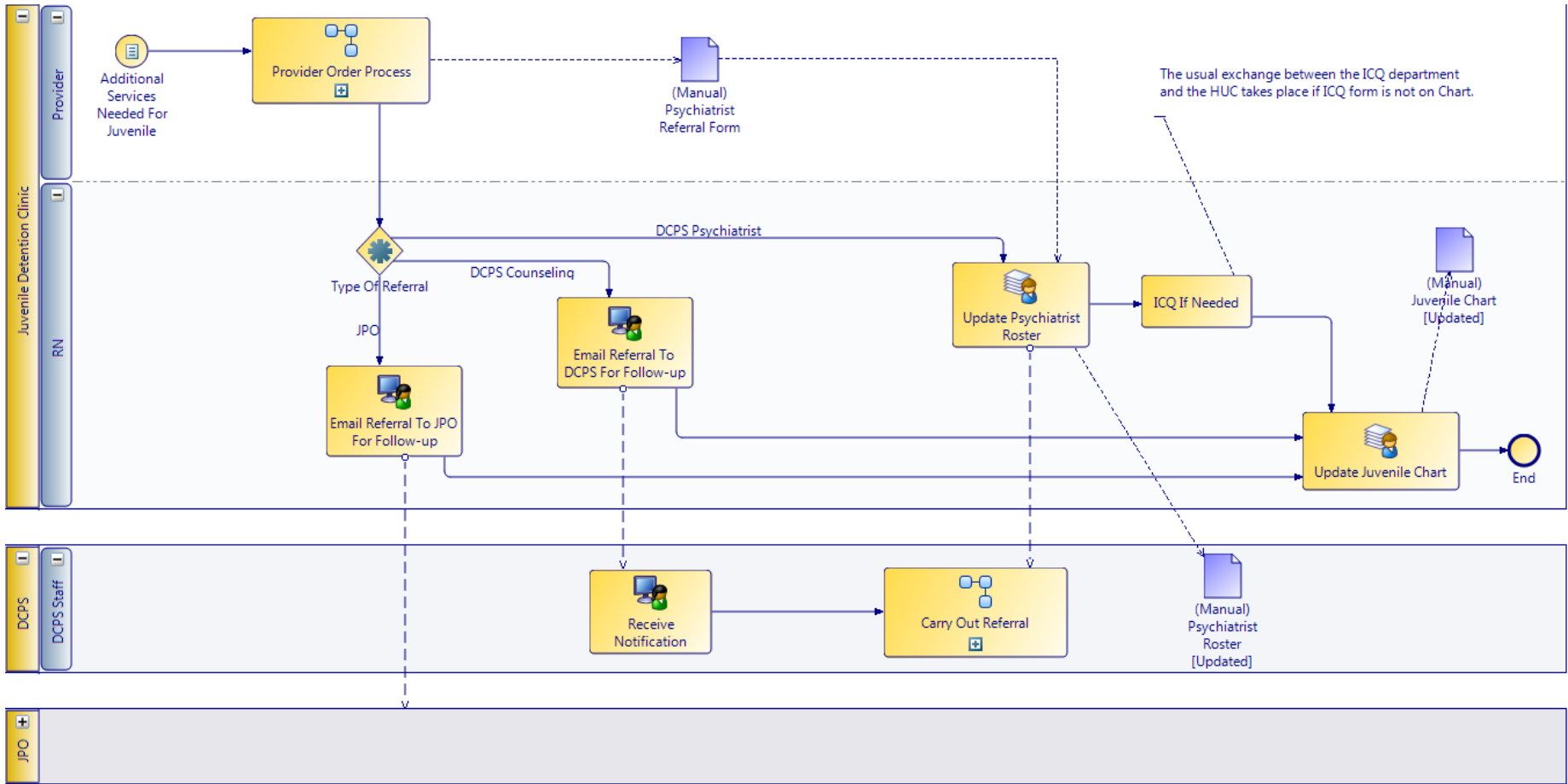
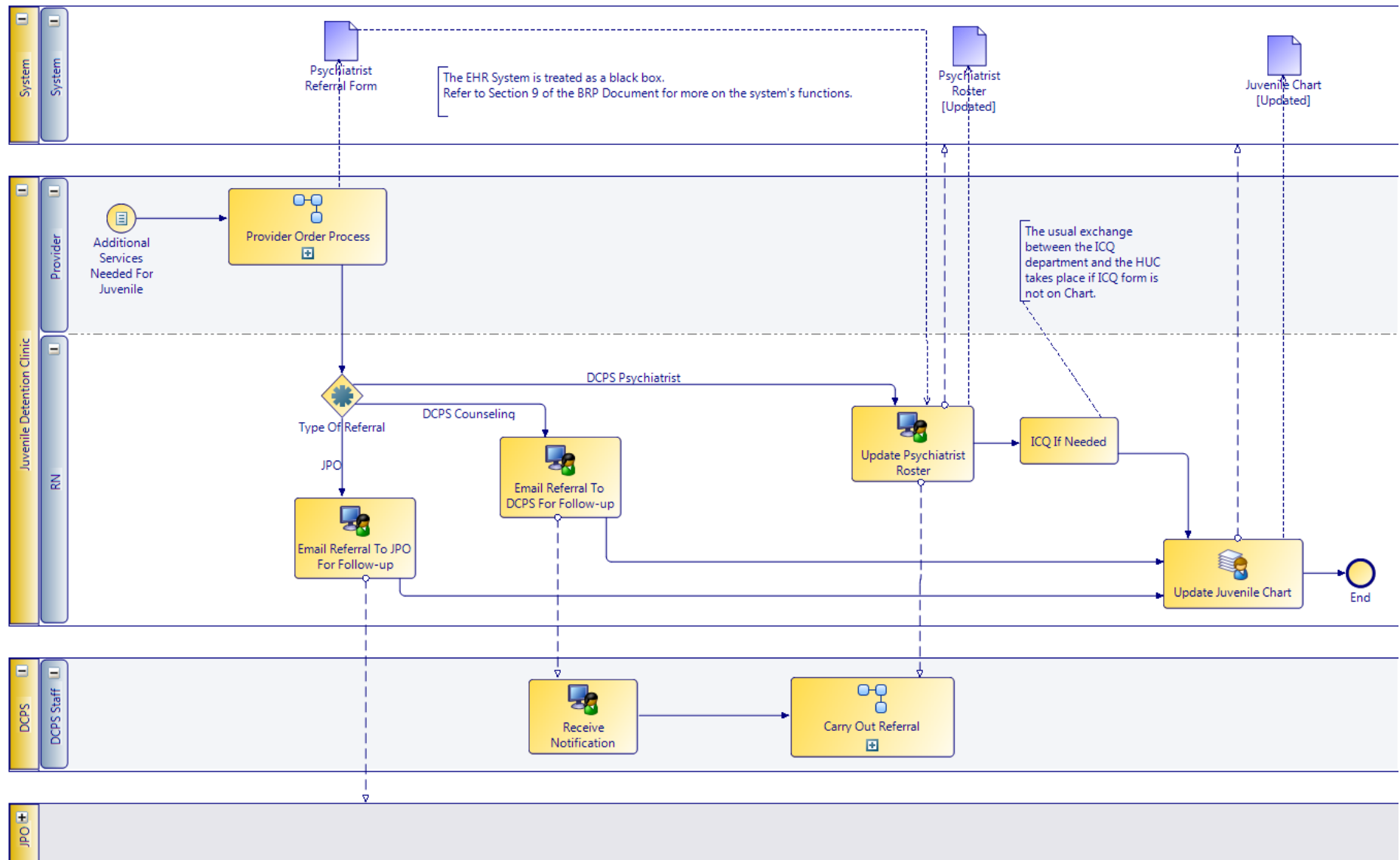


Figure 55: C To-Be P7.7 "Provider Initiated Referrals Process Diagram"



9.7.8 C P7.8 – INTERNAL COMMUNICATION/EXCHANGES

Besides processes listed in the previous sections, other frequent exchanges take place continuously in the Clinic, in order to coordinate the care for Juveniles.

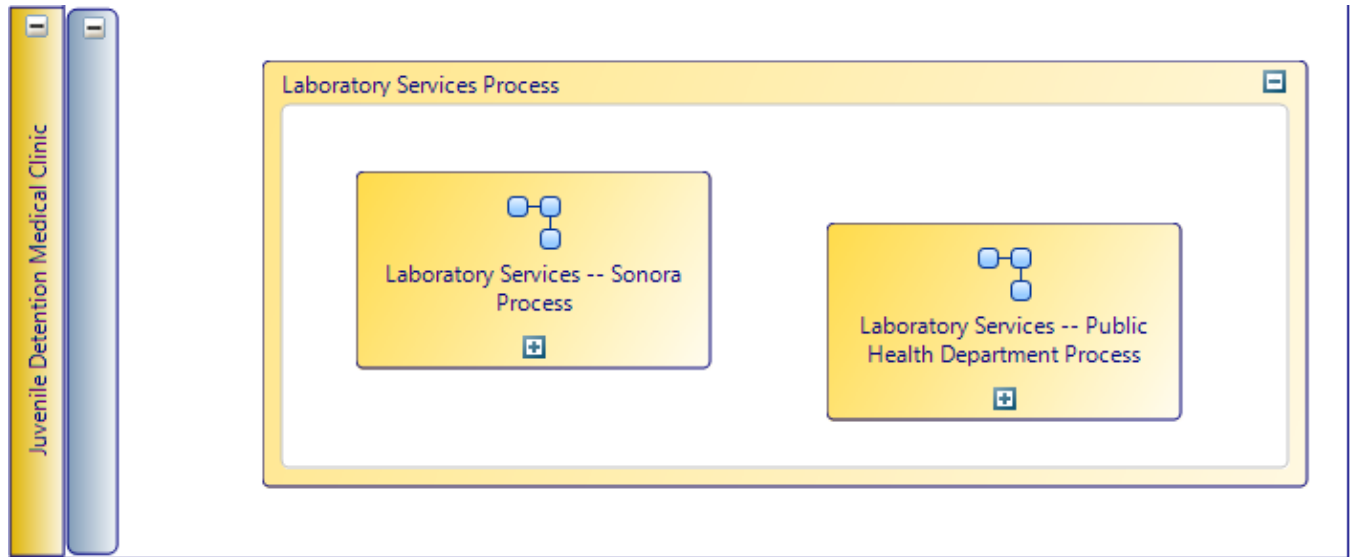
Emails are used as a means other internal communication.

In the to-be version of internal referrals, these exchanges should be carried out via secure channels.

9.8 C P8 – LABORATORY SERVICES

Laboratory Services are received from Sonora Labs and the Public Health Department. Descriptions of these services are given in Sections 8.2.9.1 and 8.2.9.2.

Figure 56: C As-Is P8 "Laboratory Services Process Diagram"



- **Triggering Events/Actions**
 - Juvenile has a condition (other than STD or HIV) which requires laboratory services.
- **Involved Entities**
 - Juvenile
 - Juvenile Detention Clinic Provider or Psychiatrist
 - Juvenile Detention Clinic Health Technician (JHT)
 - Juvenile Detention Clinic Nurse Practitioner (RN)
 - Laboratory Services Provider (Sonora Labs)
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Provider Order Process
- **Pre-conditions**
 - A Provider's or Psychiatrist's order, specifying laboratory tests on a Juvenile, exists.
- **Inputs**
 - Juvenile Chart
 - Provider/Psychiatrist Order
 - Juvenile Specimen
 - Sonora Labs Binder
 - Sonora Labs Requisition Form
 - Sonora Labs Results Report
 - Provider Assessment
 - Nurse Assessment
 - iCIS Health Appraisal Form
 - Any other inputs, not listed above, pertaining to any of the following processes:
 - Provider Order Process
- **Description**
 - The Juvenile Health Technician (JHT) collects a specimen per the Provider's/Psychiatrist's order, and records the pending transaction in the Sonora Binder.
 - The JHT uses the Sonora terminal to prepare and forward the request for Lab services and makes the specimen (package) available for pickup by Sonora representatives.
 - Available samples are picked up by Sonora daily at 4pm.
 - Upon completion of lab work, Sonora teleprints results to the Juvenile Detention Clinic.
 - Upon receiving the results, the RN reviews them, updates the Sonora Binder and tags the results for the Provider/Psychiatrist signature.
 - A nurse assessment is carried out if necessary.
 - The Provider's/Psychiatrist's reviews the results.
 - New order(s) is/are issued if further action/treatment is needed for the Juvenile.
 -
- **Business Rules**
 - The package with the specimen and other necessary document must be available by 4pm for Sonora Labs pickup.
- **Calculations** – NONE

- **Outputs**

- Juvenile Chart – Updated
- Sonora Labs Binder – Updated
- Sonora Labs Results Report
- Provider Assessment – Completed
- Nurse Assessment – Completed
- iCIS Health Appraisal Form – Updated
- Any other outputs, not listed above, pertaining to any of the following processes:
 - Provider Order Process

- **Post-conditions**

- A Provider/Psychiatrist assessment (which uses the lab results as input) has been completed.
- Updated Juvenile Medical History
- Updated Juvenile Profile in iCIS

Figure 57: C As-Is P8.1 "Laboratory Services – Sonora Process Diagram"

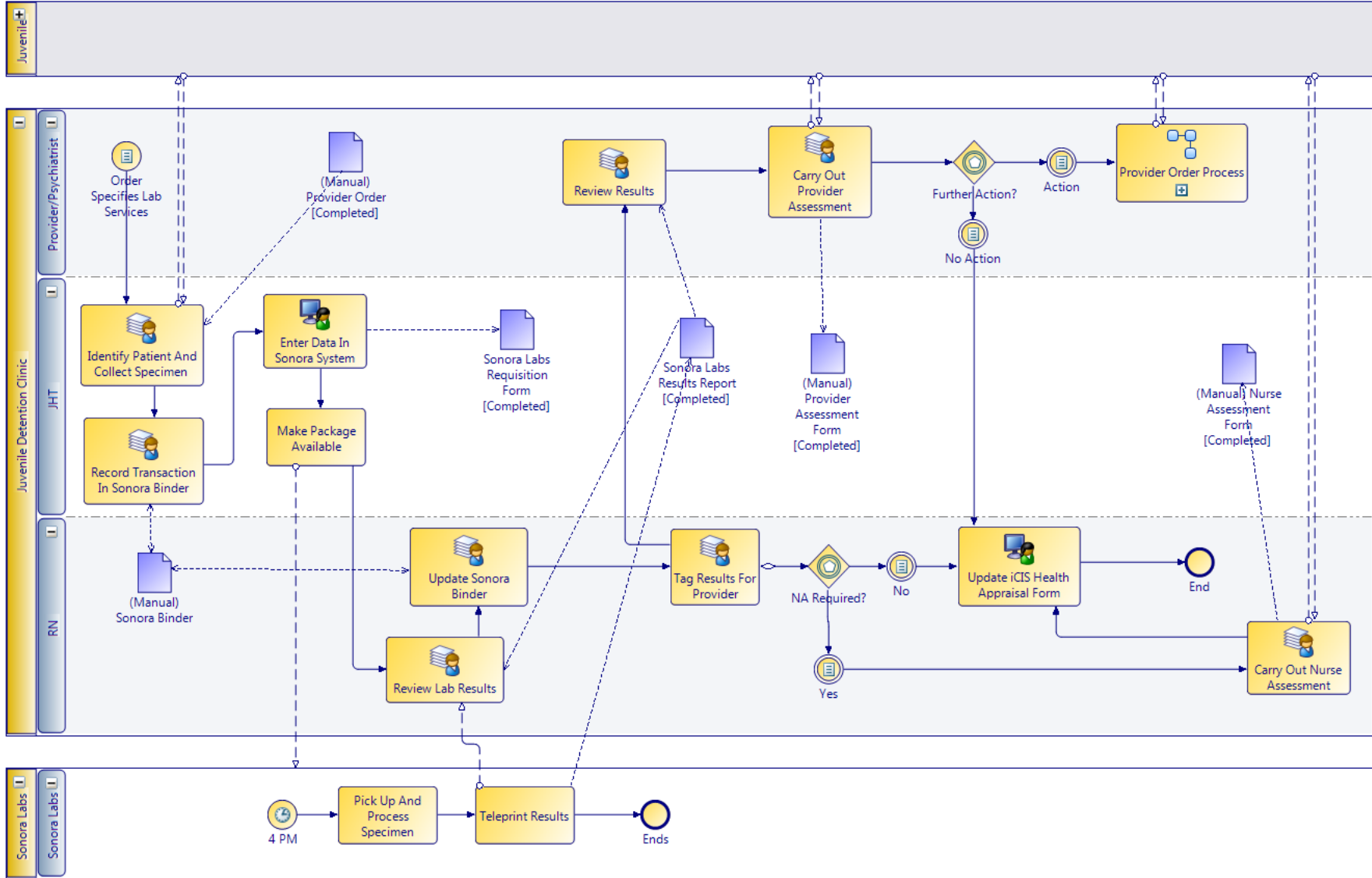
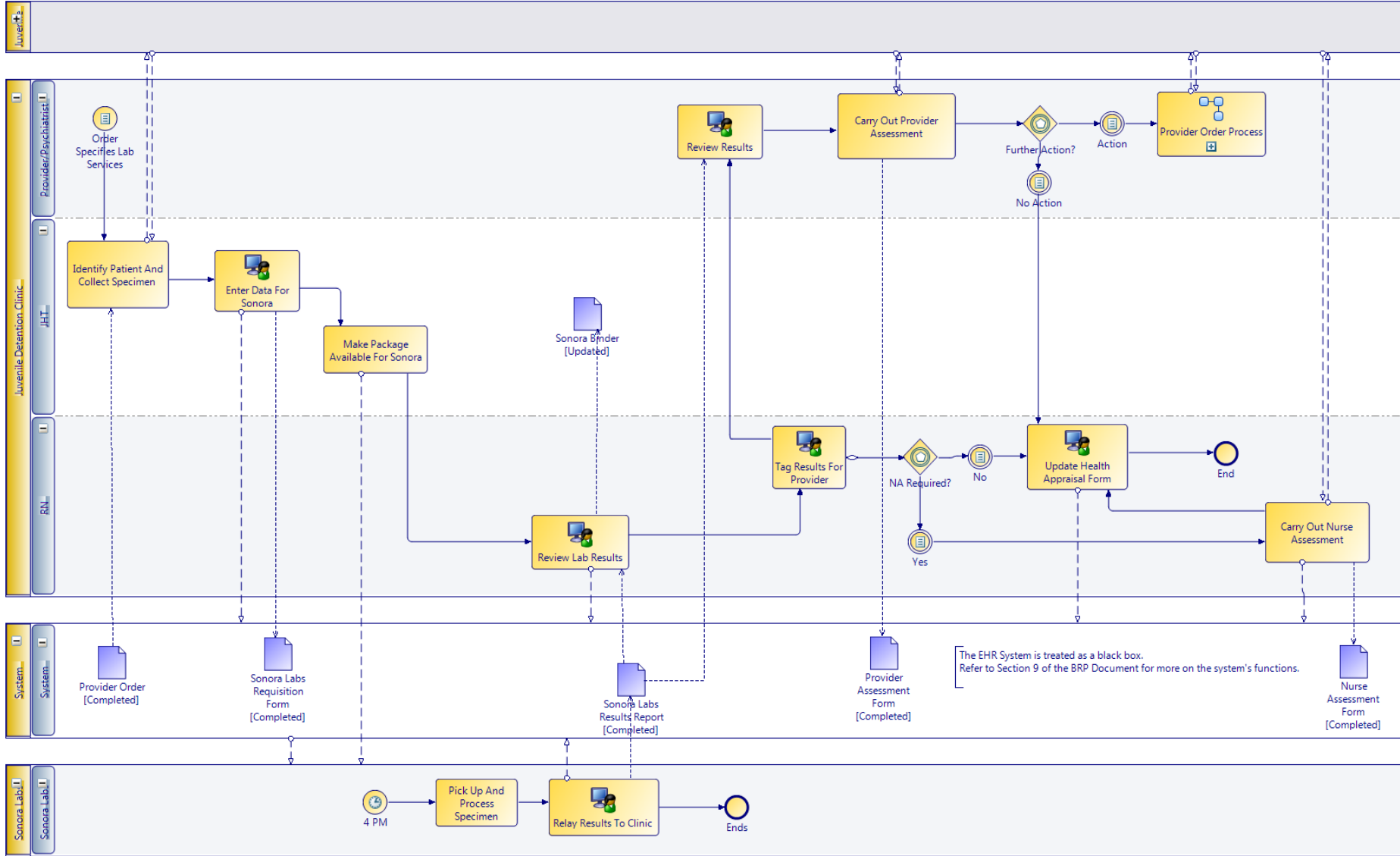


Figure 58: C To-Be P8.1 "Laboratory Services – Sonora Process Diagram"



- **Triggering Events/Actions**
 - Juvenile has an STI or HIV condition which requires that laboratory services be carried out.
- **Involved Entities**
 - Juvenile
 - Juvenile Detention Clinic Provider
 - Juvenile Detention Clinic Health Technician (JHT)
 - Juvenile Detention Clinic Nurse Practitioner (RN)
 - Juvenile Detention Center Transportation Officer (JTO)
 - Laboratory Services Provider (Public Health Department (PHD) Labs)
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Provider Sick Call Process
- **Pre-conditions**
 - A Provider's order, specifying laboratory tests on a Juvenile, exists.
- **Inputs**
 - Juvenile Chart
 - Provider Order
 - Authorization For Release Of Medical Information Form
 - Juvenile Specimen
 - PHD Lab Slips
 - STD Binder
 - PHD Labs Results Report
 - Provider Assessment
 - Nurse Assessment
 - iCIS Health Appraisal Form
 - Any other inputs, not listed above, pertaining to any of the following processes:
 - Provider Sick Call Process
- **Description**
 - The Juvenile Health Technician (JHT) completes Public Health Department (PHD) Lab Slip, explains the STI Release of Information Form to the Juvenile, and collects specimen per the Provider's order.
 - The Juvenile Transportation Office (JTO) picks up the specimen (package) and delivers it to the PHD Lab.
 - If STI results are positive:
 - Provider is contacted
 - Communicable Disease Report is completed
 - Health appraisal is updated with test results
 - Juvenile is placed on Provider Sick Call for education and treatment
 - If STI results are negative:
 - Results are recorded/filed in STD Binder
 - Health appraisal is updated with test result

- **Business Rules** – NONE
- **Calculations** – NONE
- **Outputs**
 - Juvenile Chart – Updated
 - PHD Lab Slips – Completed
 - Authorization For Release Of Medical Information Form – Updated with Juvenile input
 - STD Binder – Updated
 - PHD Labs Results Report
 - Provider Assessment – Completed
 - Nurse Assessment – Completed
 - iCIS Health Appraisal Form – Updated
 - Communicable Disease Report Form – Completed
 - Any other outputs, not listed above, pertaining to any of the following processes:
 - Provider Sick Call Process
- **Post-conditions**
 - A Provider assessment (which uses the lab results as input) has been completed.
 - Updated Juvenile Medical History
 - Updated Juvenile Profile in iCIS

Figure 59: CAs-Is P8.2 "Laboratory Services – PHD Process Diagram"

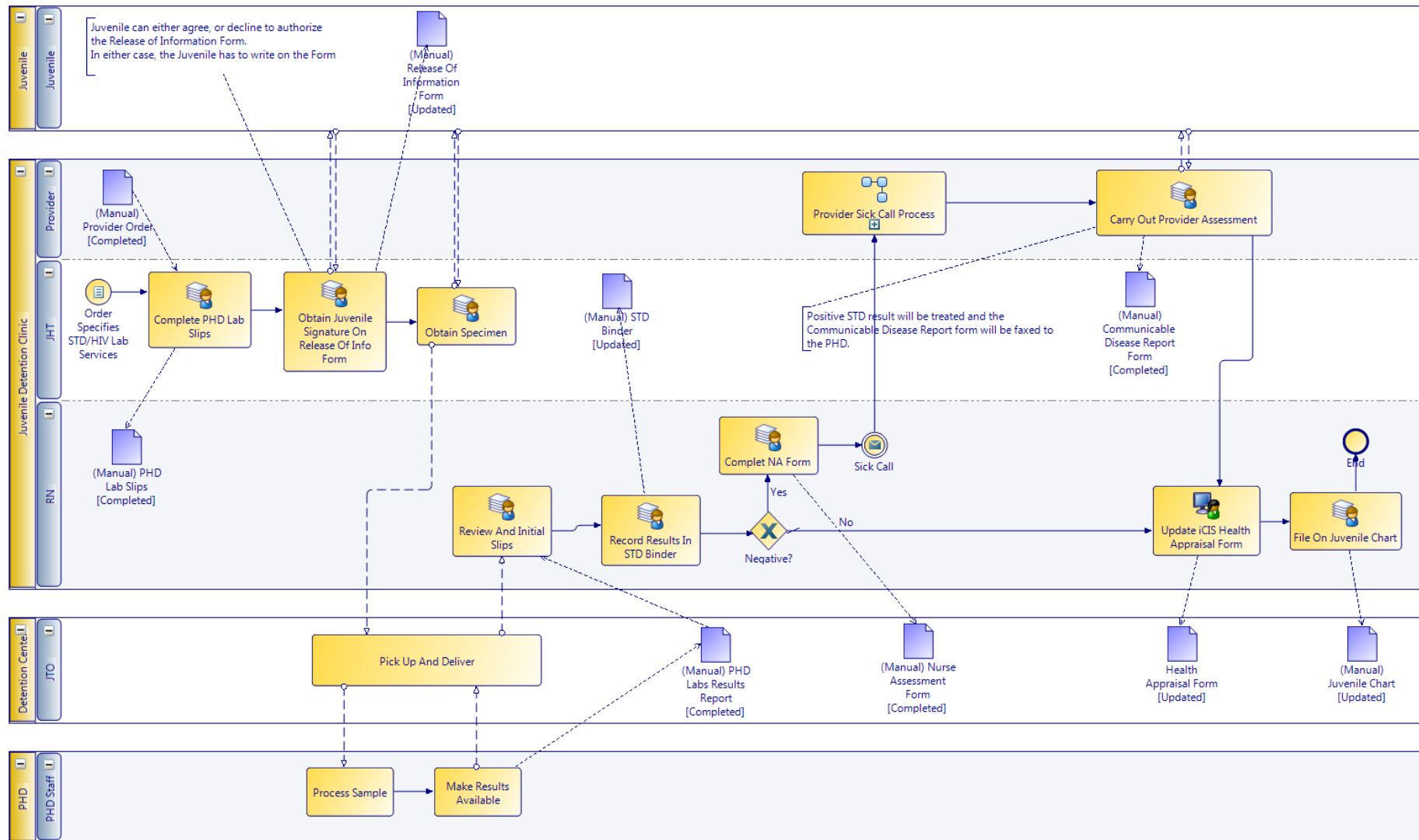
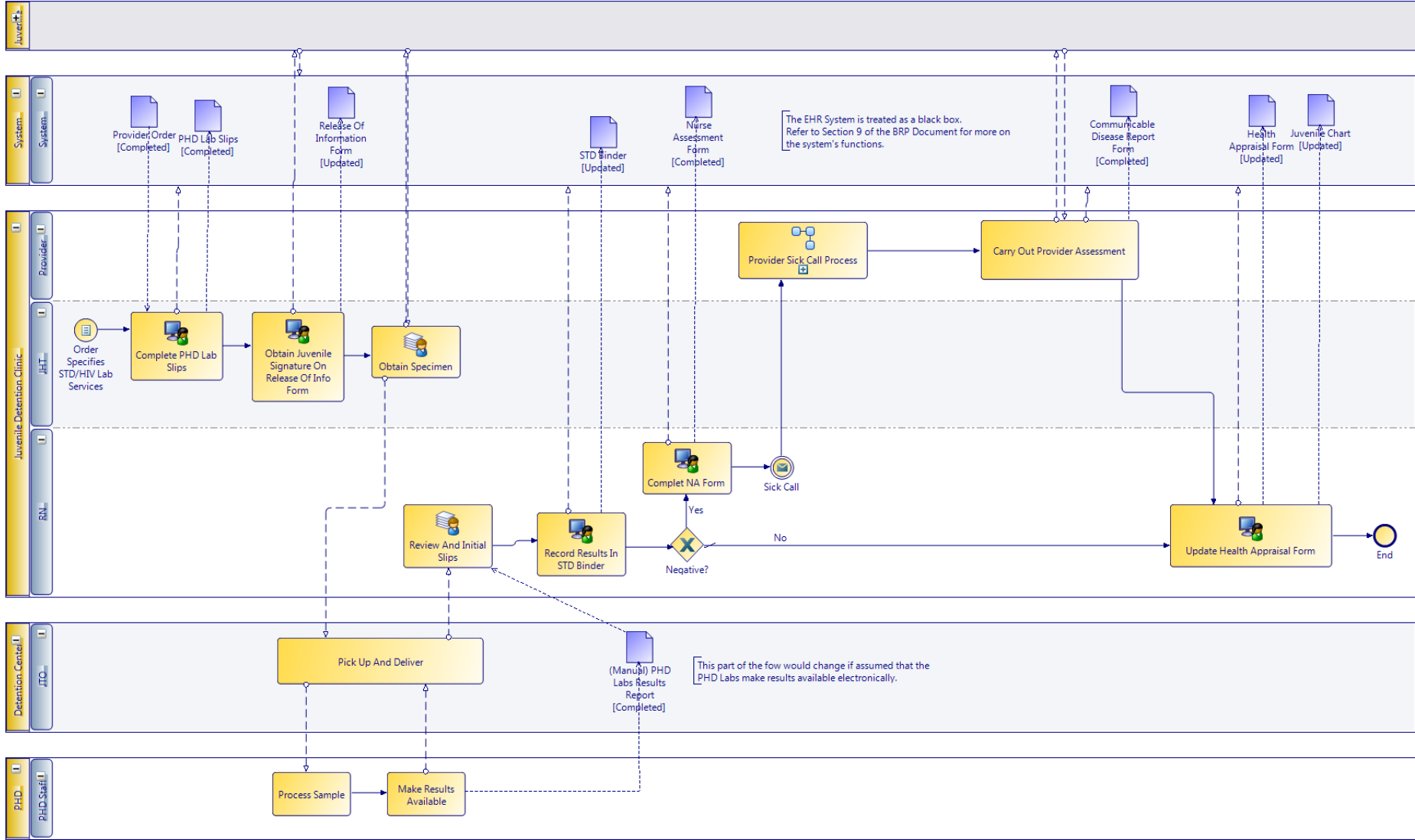


Figure 60: C To-Be P8.2 "Laboratory Services – PHD Process Diagram"



- **Triggering Events/Actions**
 - End of month
- **Involved Entities**
 - Juvenile Detention Clinic Administrative Assistant
 - Juvenile Detention Clinic Medical Director
 - Office of Management and Budget (OMB)
 - Arizona State Immunization Information System (ASIIS)
 - iCIS
 - Excel Database
- **Pre-conditions**
 - All pertinent rosters/counts have been completed by the JHTs, RNs, Providers.
- **Inputs**
 - Provider Sick Call Roster
 - Health Appraisal Roster
 - RN Sick Call Roster
 - Intake Roster
 - iCIS Juvenile in Custody Review List
 - Sonora Lab Roster
 - PHD Lab Roster
 - Tuberculin Skin Test Log
 - Emergency Room Visits Roster
 - Sub-Specialty Roster
 - Ambulance Roster
 - Psychiatrist's Roster
 - Extras and Counter Sheet Roster (other duties performed by the RNs)
 - Health Appraisal Review List
 - Immunization Count (from ASIIS)
- **Description**
 - The Administrative Assistant (manually) collects the number of patient encounters for the JHTs, RNs, and Providers.
 - The following data is compiled on a monthly basis:
 - Lab draws/treatments
 - Immunizations administered
 - TSTs
 - STIs
 - Medications administered
 - ER referrals
 - Sub-specialty referrals
 - Ambulance runs
 - Data is processed and displayed in tables and graphs to evaluate overall trends

- Data is submitted on a monthly basis to the office of budget management and Deputy Chief’s office.
- **Business Rules**
 - All monthly reports must be ready by the 8th day of each month.
 - Yearly reports must be ready by January 8
 - Data OMB is separated by facility
- **Calculations**
 - Totals
 - Averages
- **Outputs** (numbers of the following)
 - Ambulance Runs
 - Hospital Admissions
 - Health Appraisals
 - Nurse Sick Call Visits
 - Positive STI Results
 - Positive RPR (STD Related information)
 - Positive TST
 - JHT Patient Encounters
 - Provider Sick Call Visits
 - Nurse Intake Visits
 - Medications Administered
 - Health Appraisal
 - Psychiatrist Visits
 - ER Referrals
 - Sub-specialty Referrals
- **Post-conditions**
 - Reports have been completed and are ready for review by interested stakeholders.

Figure 61: C As-Is P9 "Reports Process Diagram"

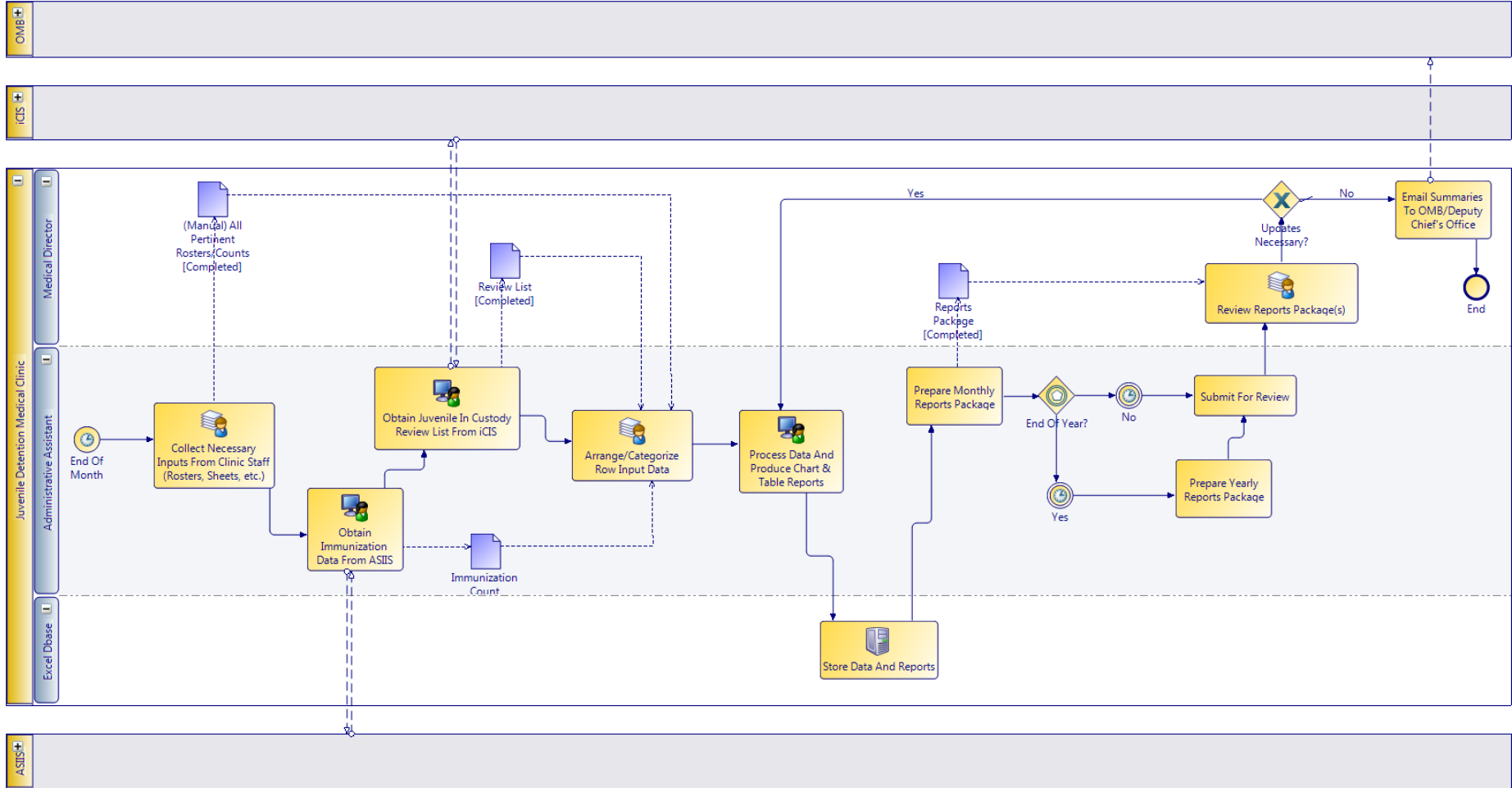
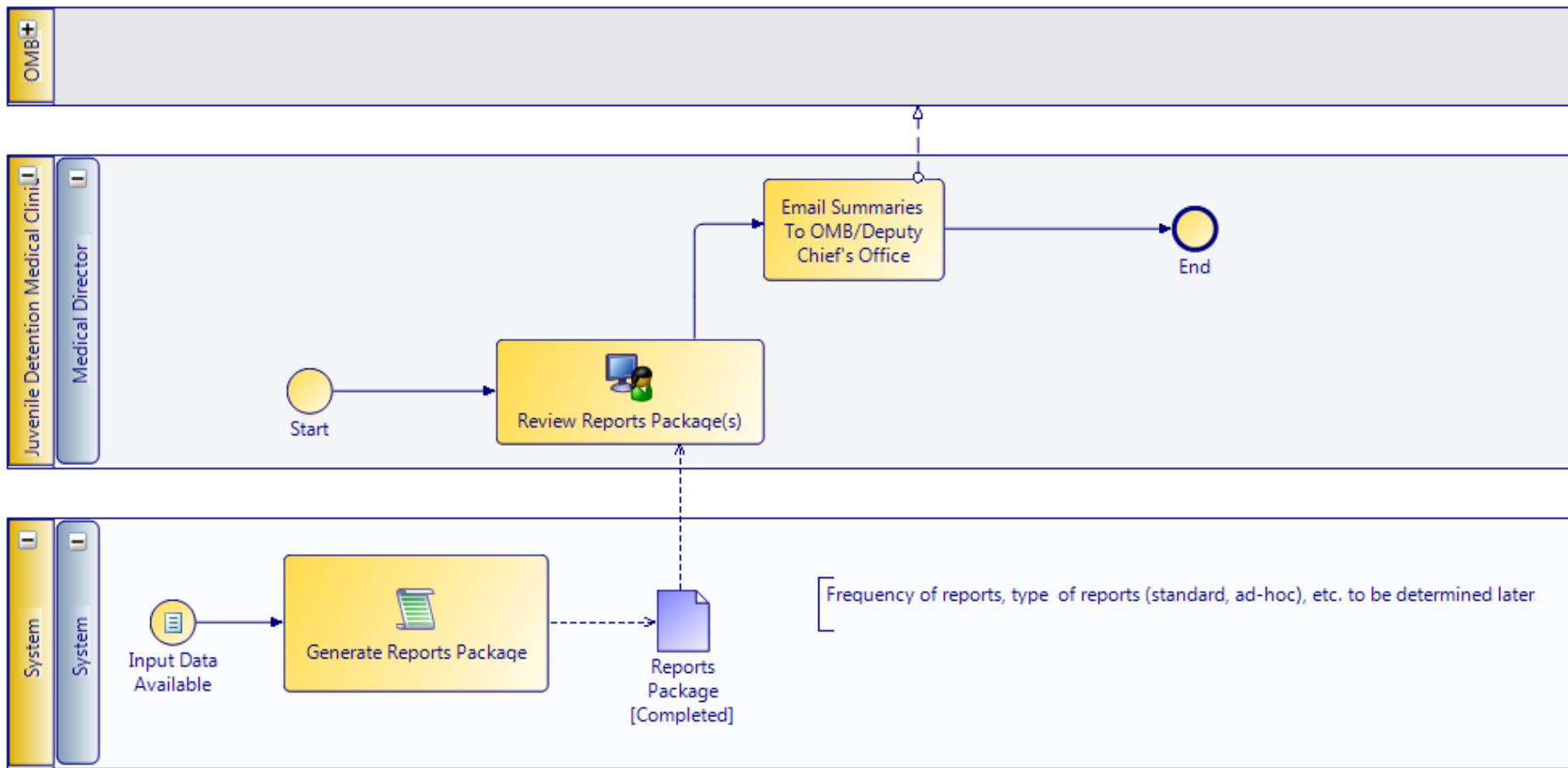


Figure 62: C To-Be P9 "Reports Process Diagram"



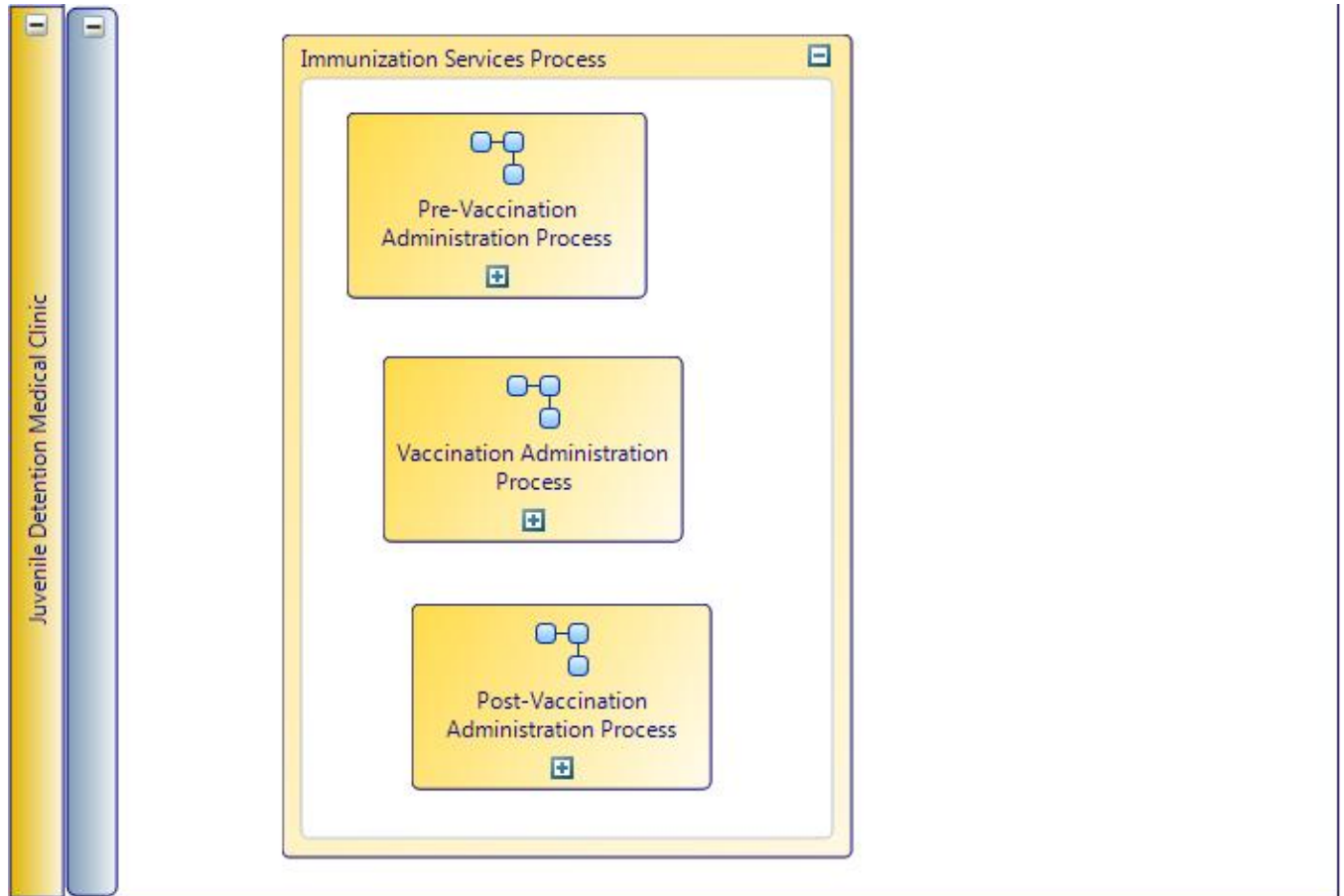
9.10 C P10 – IMMUNIZATION SERVICES

Immunization Services are grouped into three main processes:

- Pre-Vaccination Administration Process
- Vaccination Administration Process
- Post-Vaccination Administration Process

Descriptions of these services are given in Sections 8.2.10.1 and 8.2.10.2 and 8.2.10.3.

Figure 63: C As-Is P10 "Immunization Services Process Diagram"



- **Triggering Events/Actions**
 - Immunization records are required for the Physical Exam.
- **Involved Entities**
 - Guardian
 - Juvenile Detention Clinic Provider or Provider
 - Juvenile Detention Clinic Health Technician (JHT)
 - Juvenile Detention Clinic Nurse Practitioner (RN)
 - Arizona State Immunization Information System (ASIIS)
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Provider Order Process
 - Physical Examination Process
- **Pre-conditions**
 - Health Appraisal has been initiated.
- **Inputs**
 - ASIIS Form (containing patient's vaccination record)
 - Immunization Record (hard copy when ASIIS records are missing)
 - Immunization Record Request Form
 - Immunization Consent And Screening Information (from Guardian)
 - Immunization Roster
 - Juvenile Chart
 - Any other inputs, not listed above, pertaining to any of the following processes:
 - Provider Order Process
 - Physical Examination Process
- **Description**
 - The JHT obtains Juvenile vaccination records for review by the Provider during Physical Examination
 - The RN obtains the Guardian's consent and updates the Immunization Binder.
- **Business Rules**
 - The Immunization Consent Form must be signed off by two RNs.
- **Calculations – NONE**
- **Outputs**
 - Immunization Record Request Form – Completed
 - Immunization Consent And Screening Information (from Guardian) – Completed and Signed off
 - Immunization Roster – Updated
 - Juvenile Chart -- Updated
 - Any other outputs, not listed above, pertaining to any of the following processes:
 - Provider Order Process
 - Physical Examination Process
- **Post-conditions**
 - The Juvenile needing vaccination is ready to receive immunization.

Figure 64: C As-Is P10.1 "Pre-Vaccination Administration Process Diagram"

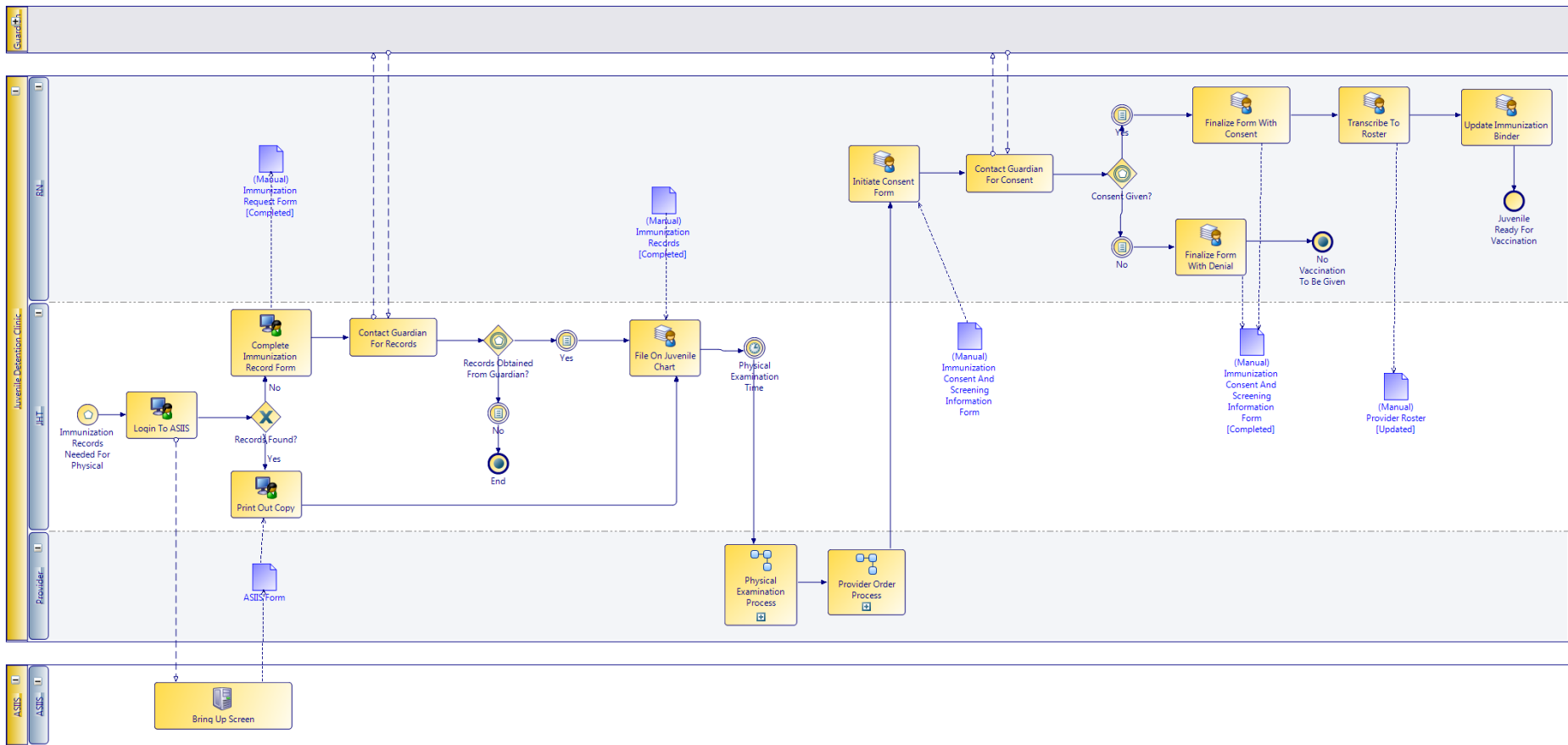
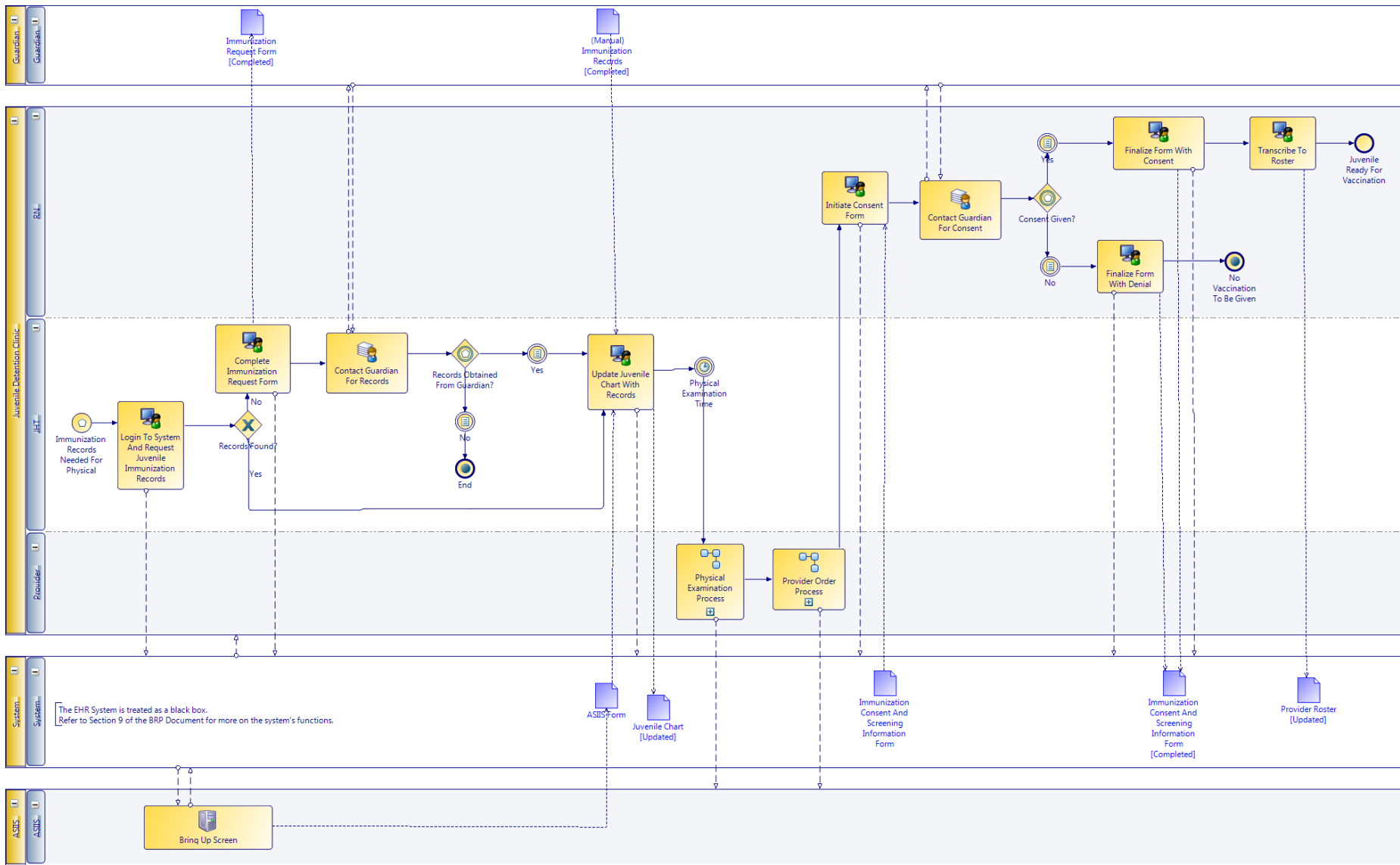


Figure 65: C To-Be P10.1 "Pre-Vaccination Administration Process Diagram"



- **Triggering Events/Actions**
 - Vaccination is ready to be administered to Juvenile.
- **Involved Entities**
 - Juvenile
 - Juvenile Detention Clinic Provider or Provider
 - Juvenile Detention Clinic Health Technician (JHT)
 - Juvenile Detention Clinic Nurse Practitioner (RN)
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Provider Order Process
- **Pre-conditions**
 - The Pre-Vaccination Administration Process has been completed.
- **Inputs**
 - Immunization Roster
 - Immunization Screening Information Form
 - Consent For Immunization Against Varicella Form
 - Adult Immunization Administration Record Form
 - Juvenile Chart
 - Any other inputs, not listed above, pertaining to any of the following processes:
 - Provider Order Process
- **Description**
 - During this process the recommended vaccine is administered to Juvenile and documented on the immunization record.
- **Business Rules – NONE**
- **Calculations – NONE**
- **Outputs**
 - Immunization Roster – Updated
 - Immunization Screening Information Form – Completed
 - Consent For Immunization Against Varicella Form – Completed
 - Adult Immunization Administration Record Form – Completed
 - Juvenile Chart – Updated
 - Any other outputs, not listed above, pertaining to any of the following processes:
 - Provider Order Process
- **Post-conditions**
 - The Juvenile received the needed immunizations while in detention.

Figure 66: C.As-Is P10.2 "Vaccination Administration Process Diagram"

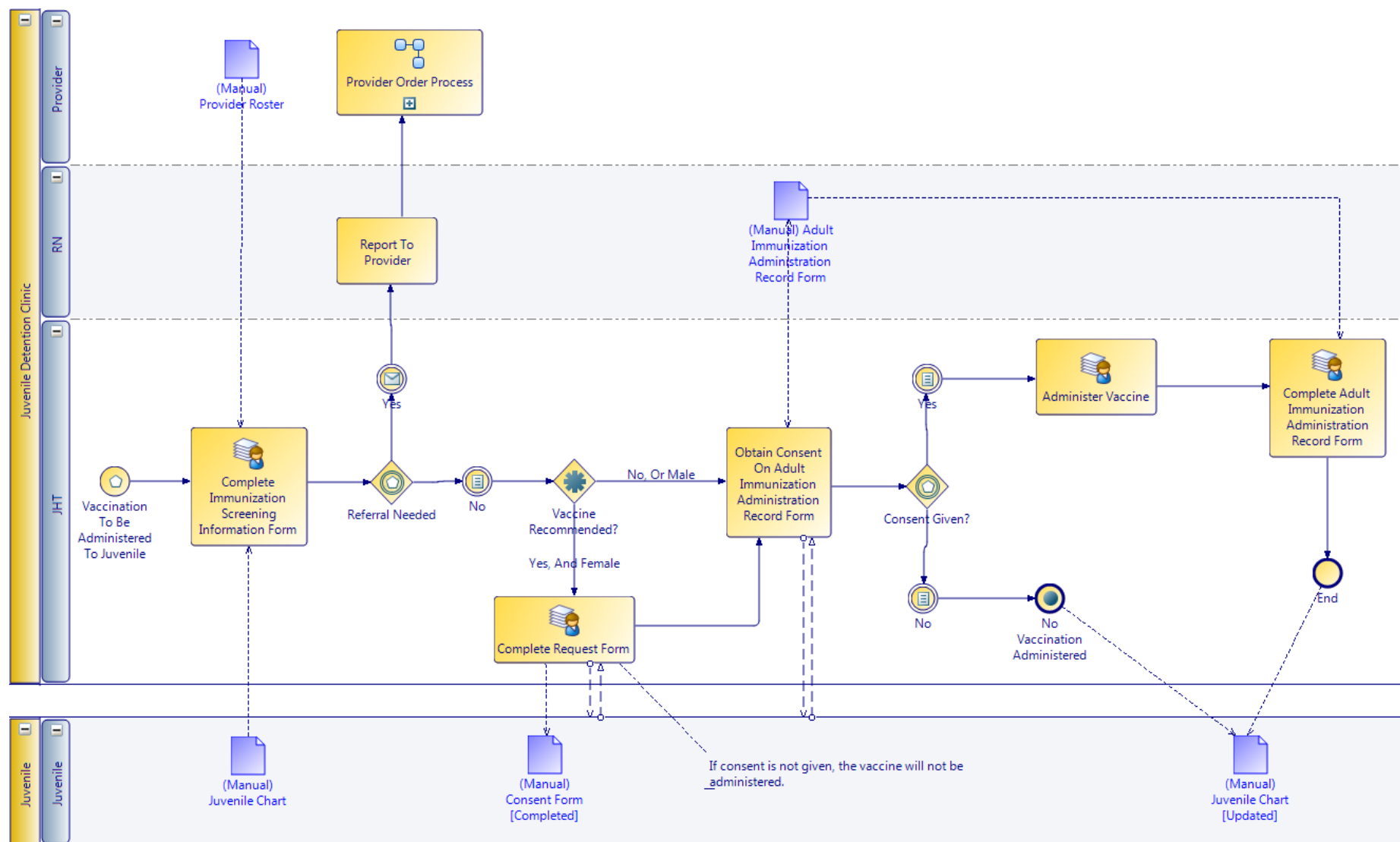
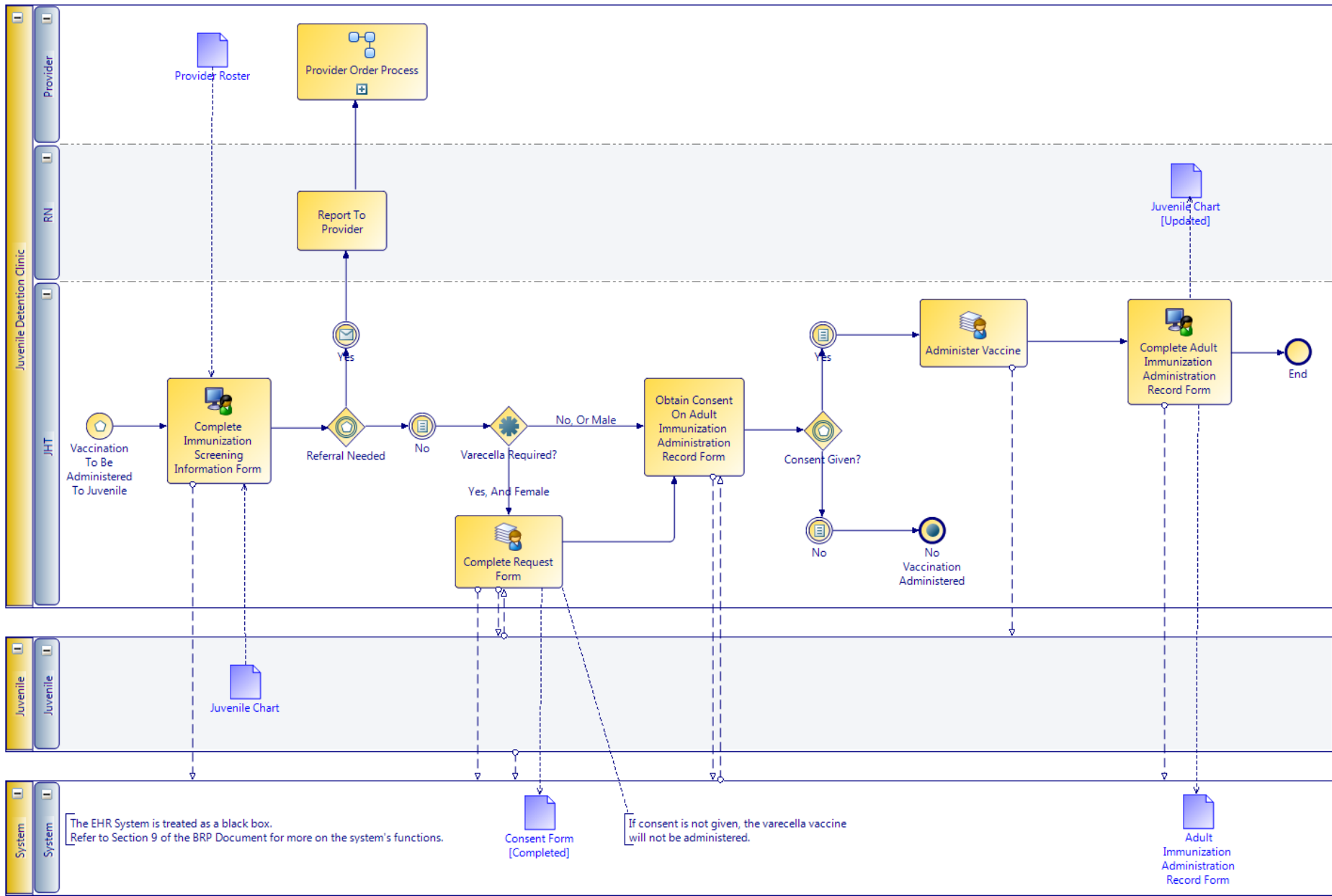


Figure 67: C-To-Be P10.2 "Vaccination Administration Process Diagram"



9.10.3 C P10.3 – POST-VACCINATION ADMINISTRATION

- **Triggering Events/Actions**
 - Juvenile has been given the vaccine.
- **Involved Entities**
 - Juvenile Detention Clinic Health Technician (JHT)
 - Juvenile Detention Center Probation Officer (JDO)
 - Arizona State Immunization Information System (ASIIS)
- **Pre-conditions**
 - The Vaccination Administration Process has been completed.
- **Inputs**
 - ASIIS Form (containing patient's vaccination records)
 - Vaccination Information Sheet (VIS) Form – Completed
 - Information After Immunization Screening Form
 - Juvenile Chart
- **Description**
 - During this process the required documentation is completed and a copy of immunizations is placed in the Juvenile personal belongings.
- **Business Rules** – NONE
- **Calculations** – NONE
- **Outputs**
 - ASIIS Form (containing patient's vaccination records) – Updated
 - Information After Immunization Screening Form – Completed
 - Juvenile Chart – Updated
- **Post-conditions**
 - Information on the vaccination status of Juvenile is ready to be given to the Guardian
 - All relevant records are made available for the Guardian

Figure 68: CAs-Is P10.3 "Post-Vaccination Administration Process Diagram"

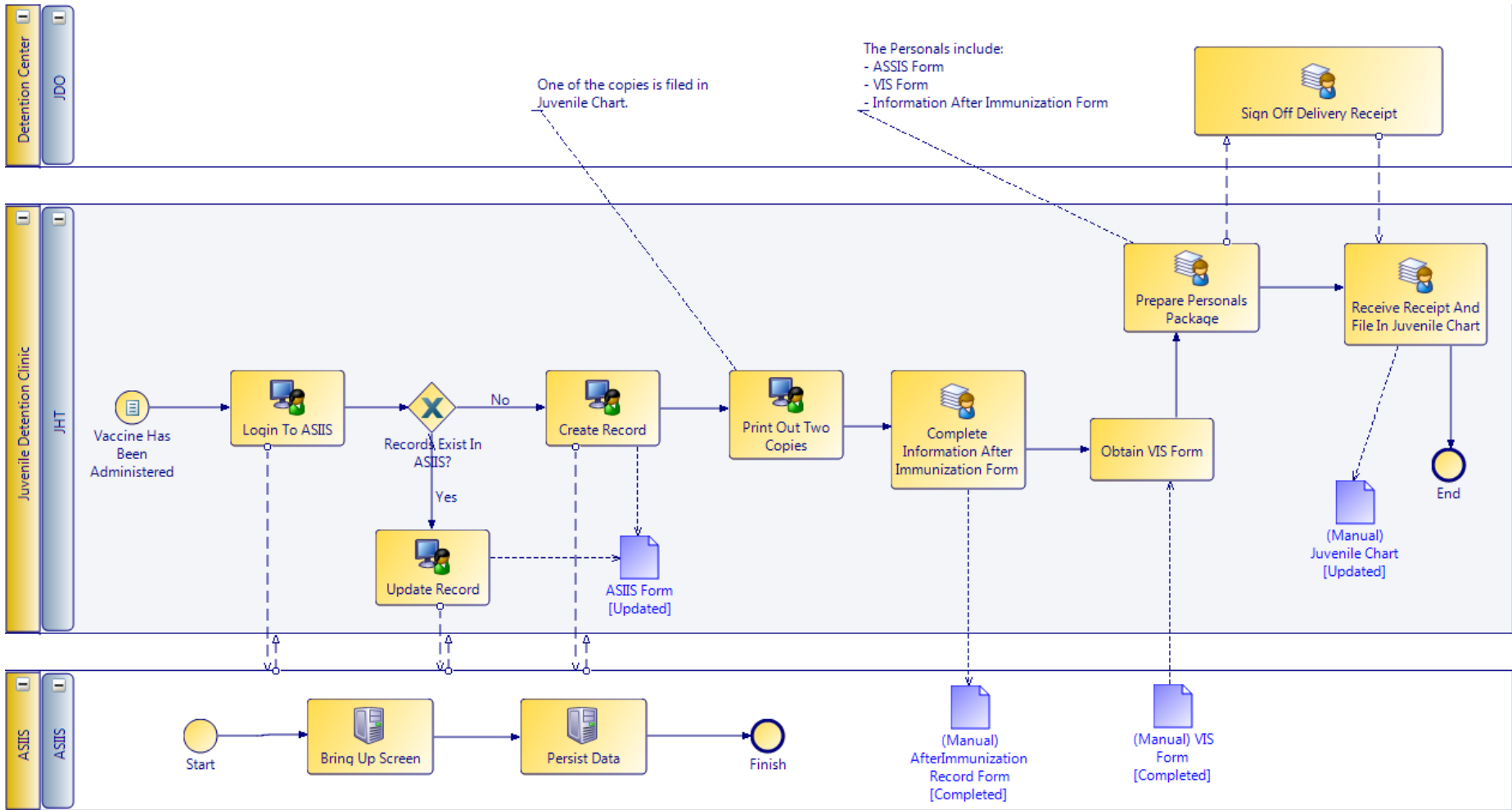
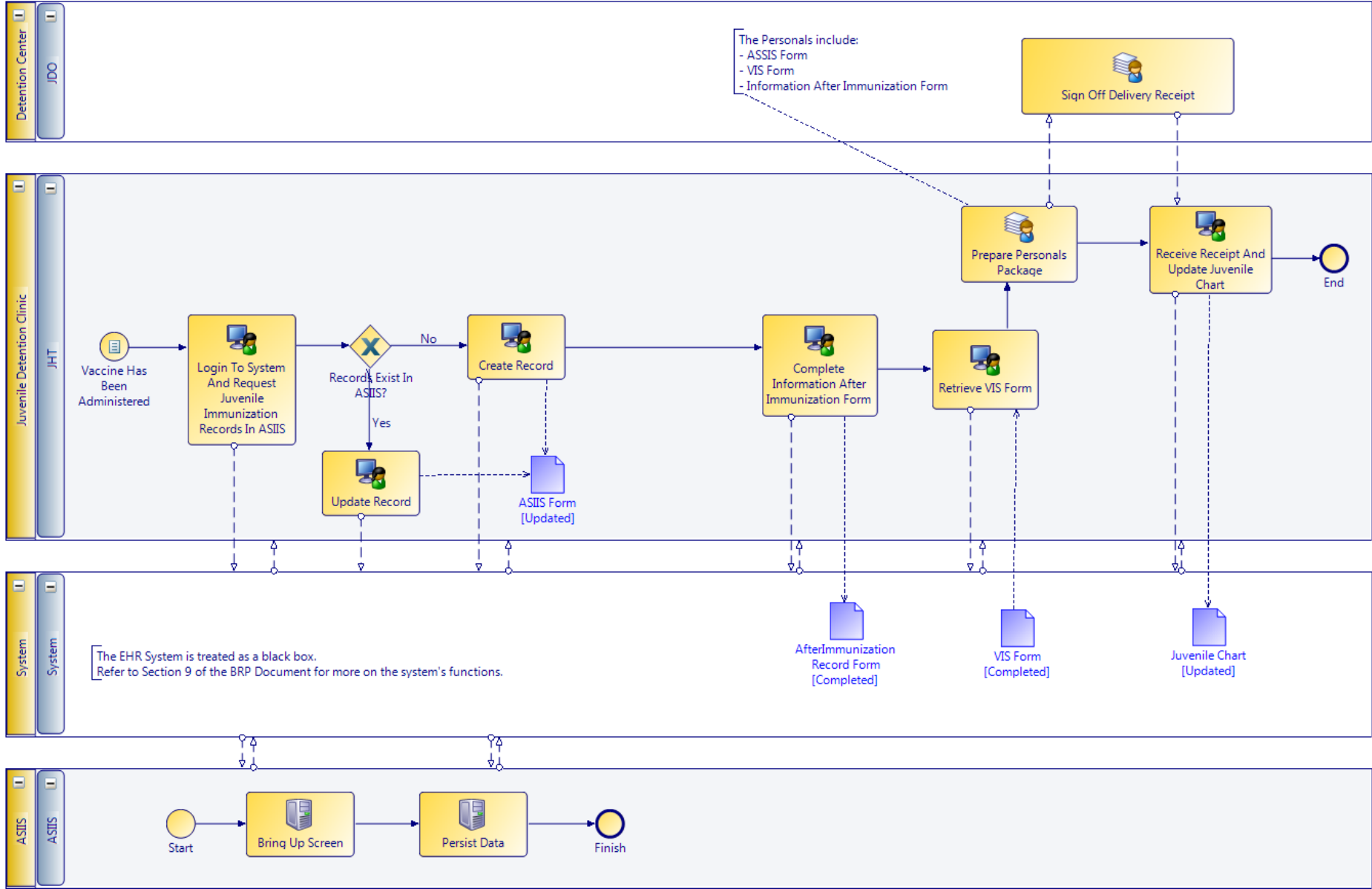


Figure 69: C To-Be P10.3 "Post-Vaccination Administration Process Diagram"

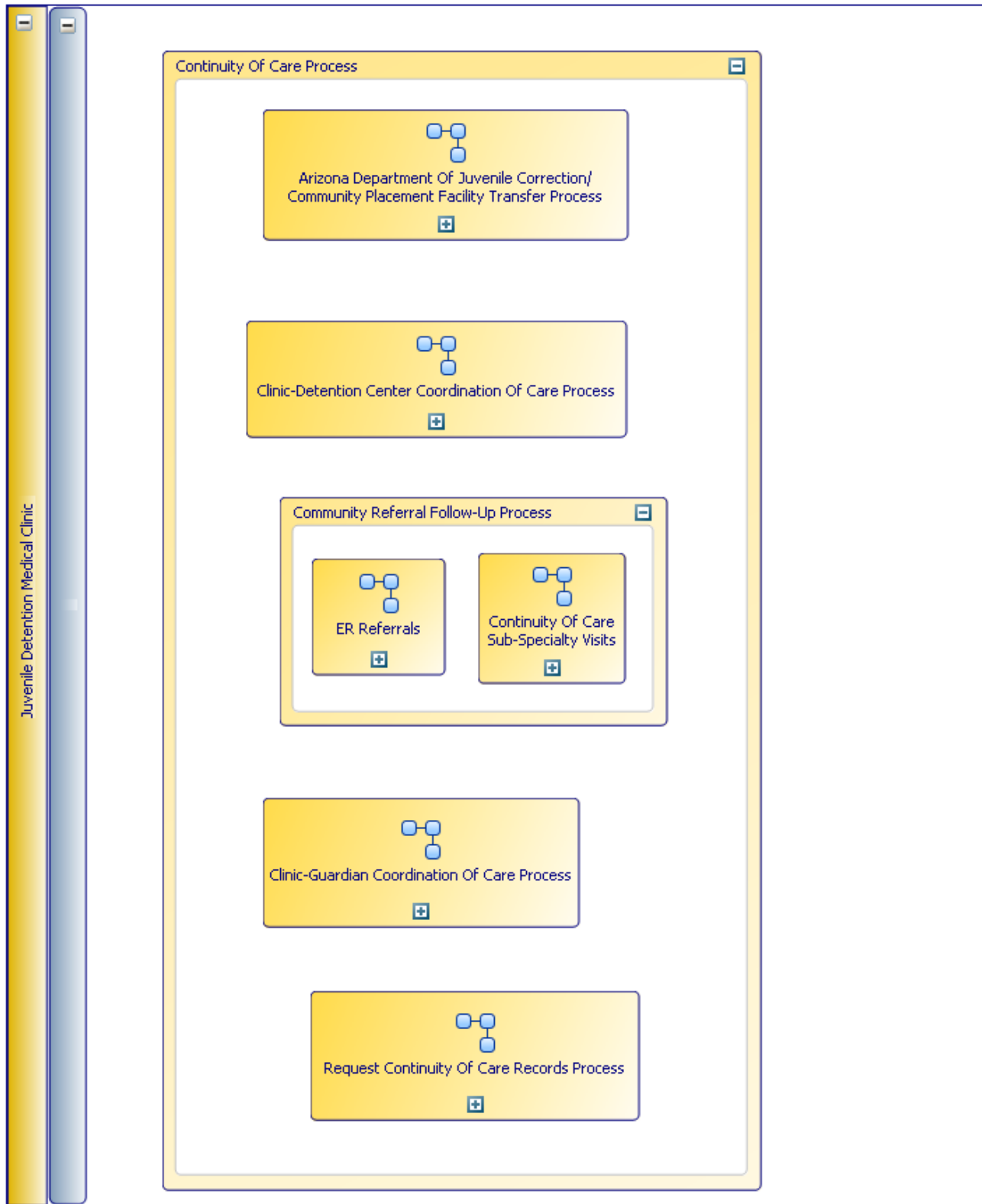


9.11 C P11 CONTINUITY OF CARE SERVICES

- **Triggering Events/Actions**
 - Medical care for the Juvenile is needed and/or takes place outside the clinic.
- **Involved Entities**
 - Any entities involved in either of the following sub-processes:
 - Arizona Department Of Juvenile Correction (ADJC)/Community Placement Facility (CPF) Transfer Process
 - Clinic-Detention Center Coordination Of Care Process
 - Community Referral Follow-up Process
 - ER Referrals
 - Continuity Of Care Sub-Specialty Visits
 - Clinic-Guardian Coordination Of Care Process
 - Request Continuity Of Care Records Process
- **Pre-conditions**
 - Any preconditions pertaining to any of the sub-processes listed below apply:
 - Arizona Department Of Juvenile Correction (ADJC)/Community Placement Facility (CPF) Transfer Process
 - Clinic-Detention Center Coordination Of Care Process
 - Community Referral Follow-up Process
 - ER Referrals
 - Continuity Of Care Sub-Specialty Visits
 - Clinic-Guardian Coordination Of Care Process
 - Request Continuity Of Care Records Process
- **Inputs**
 - Any inputs pertaining to any of the following sub-processes:
 - Arizona Department Of Juvenile Correction (ADJC)/Community Placement Facility (CPF) Transfer Process
 - Clinic-Detention Center Coordination Of Care Process
 - Community Referral Follow-up Process
 - ER Referrals
 - Continuity Of Care Sub-Specialty Visits
 - Clinic-Guardian Coordination Of Care Process
 - Request Continuity Of Care Records Process
- **Description**
 - The activities pertaining to Community Referral Follow-up Process have been detailed as part of the External Referrals group of the Referrals functional area.
 - The activities pertaining to the remaining four processes are detailed in Sections 11.1 through 11.4.
- **Business Rules**
 - Any business rules pertaining to any of the sub-processes listed below apply:

- Arizona Department Of Juvenile Correction (ADJC)/Community Placement Facility (CPF) Transfer Process
 - Clinic-Detention Center Coordination Of Care Process
 - Community Referral Follow-up Process
 - ER Referrals
 - Continuity Of Care Sub-Specialty Visits
 - Clinic-Guardian Coordination Of Care Process
 - Request Continuity Of Care Records Process
- **Calculations** – NONE
- **Outputs**
 - Any outputs pertaining to any of the following sub-processes:
 - Arizona Department Of Juvenile Correction (ADJC)/Community Placement Facility (CPF) Transfer Process
 - Clinic-Detention Center Coordination Of Care Process
 - Community Referral Follow-up Process
 - ER Referrals
 - Continuity Of Care Sub-Specialty Visits
 - Clinic-Guardian Coordination Of Care Process
 - Request Continuity Of Care Records Process
- **Post-conditions**
 - Any post conditions pertaining to any of the sub-processes listed below apply:
 - Arizona Department Of Juvenile Correction (ADJC)/Community Placement Facility (CPF) Transfer Process
 - Clinic-Detention Center Coordination Of Care Process
 - Community Referral Follow-up Process
 - ER Referrals
 - Continuity Of Care Sub-Specialty Visits
 - Clinic-Guardian Coordination Of Care Process
 - Request Continuity Of Care Records Process

Figure 70: C As-Is P11 "Continuity Of Care Process Diagram"



- **Triggering Events/Actions**
 - Juvenile has been committed to the Arizona Department of Juvenile Correction (ADJC), or to the Community Placement Facility (CPF).
- **Involved Entities**
 - Juvenile Detention Clinic HUC
 - Juvenile Detention Clinic RN
 - Juvenile Detention Clinic Provider
 - Sonora/PHD Lab
- **Pre-conditions**
 - Juvenile is in custody.
- **Inputs**
 - Email to the Clinic from the Court.
 - ADJC/CPF checklist
 - Transfer Summary Form
 - Juvenile Chart
- **Description**
 - During this process the Clinic coordinates care for the Juvenile with either the ADJC, or CPF.
- **Business Rules**
 - ADJC mandates that all items listed in the checklist presented to the Clinic accompany the Juvenile.
 - Two signoffs (the RN and the Provider) are required in the Transfer Summary Form.
- **Calculations – NONE**
- **Outputs**
 - ADJC/CPF checklist – Completed
 - Transfer Summary Form – Completed
 - Juvenile Chart – Updated
 - Documents Packet – Prepared
- **Post-conditions**
 - Juvenile is ready to be transferred to ADJC, or CPF.

Figure 71: C As-Is P11.1 "ADJC/PCF Process Diagram"

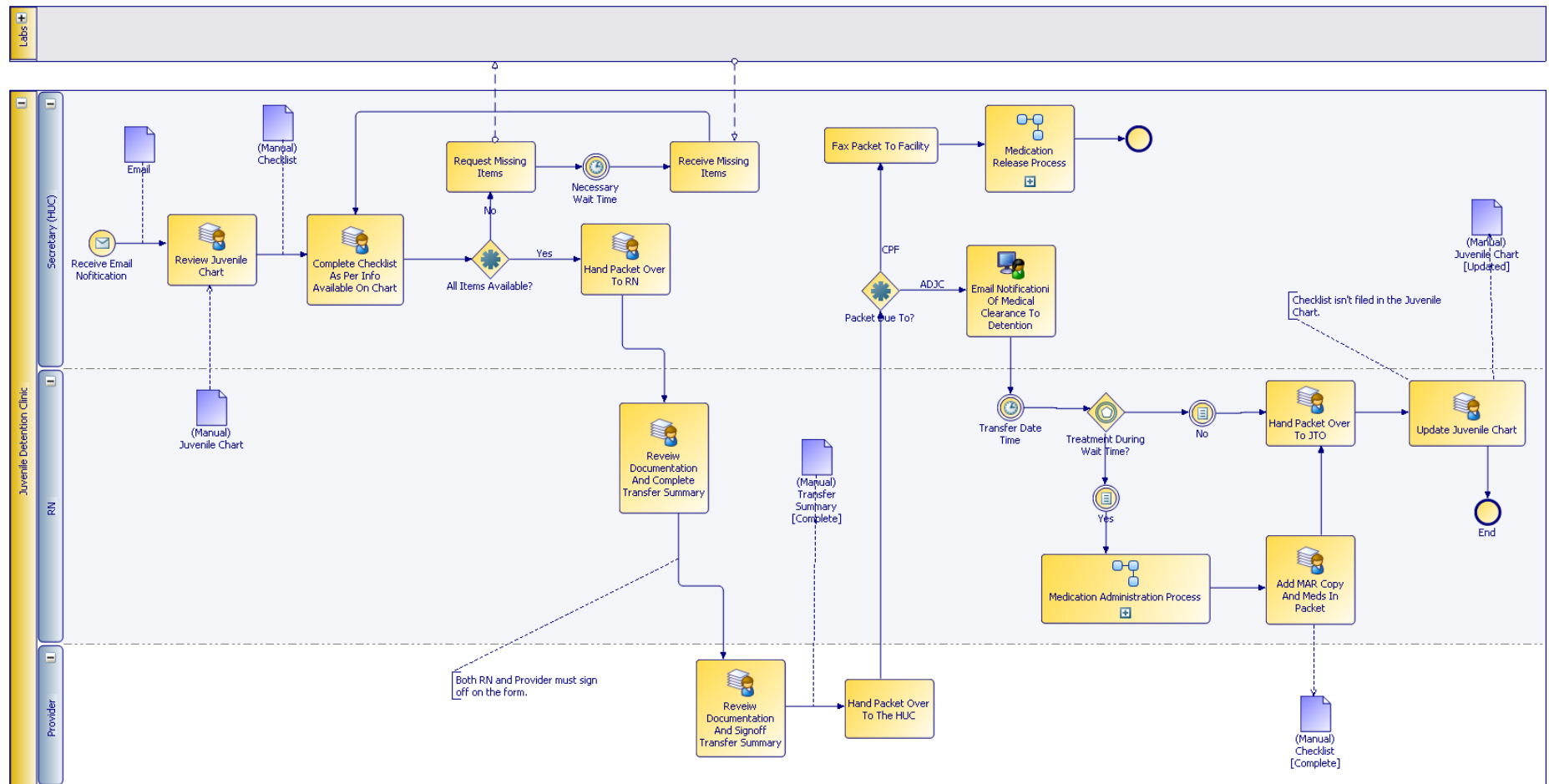
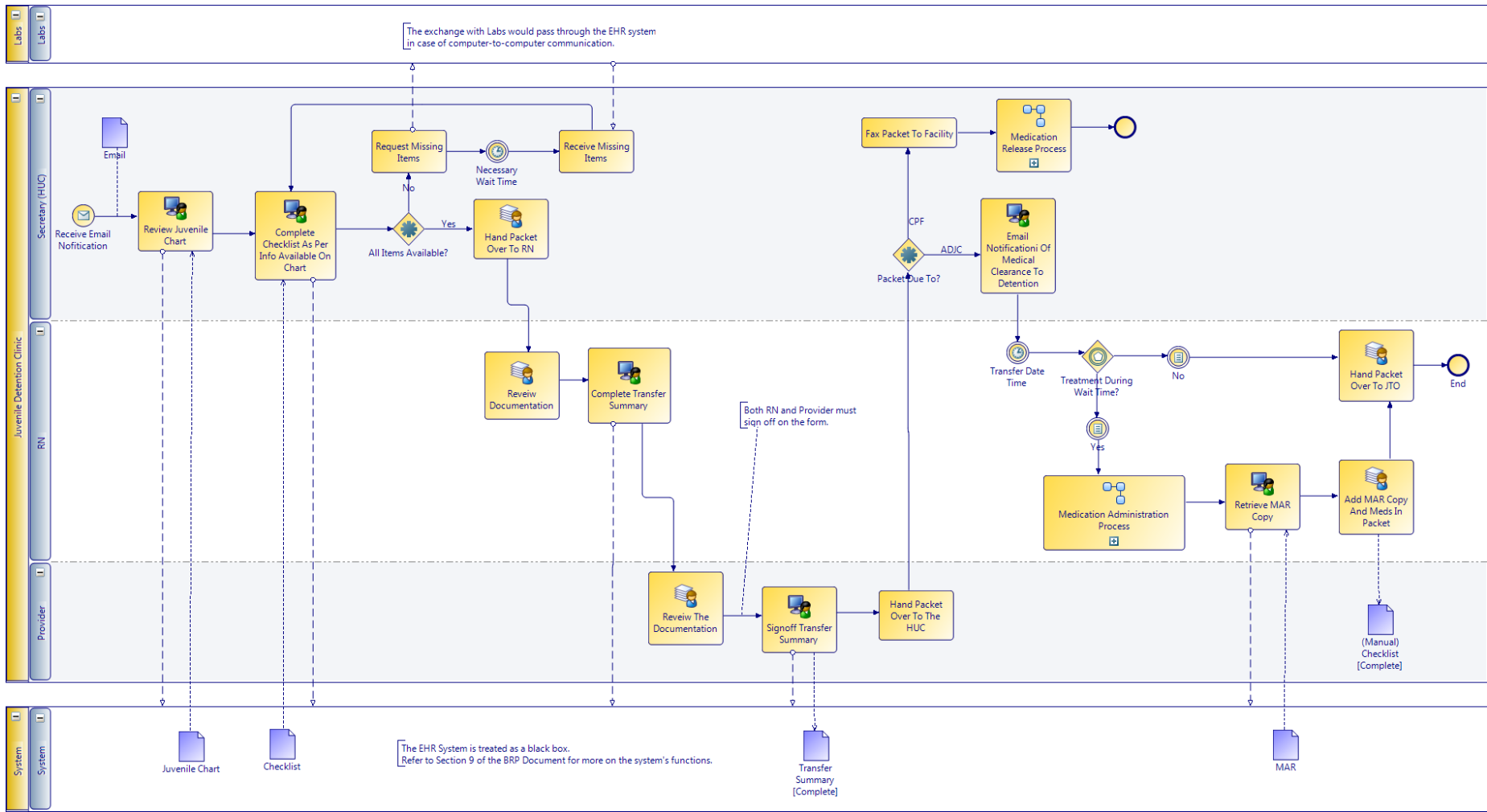


Figure 72: C To-Be P11.1 "ADJC/PCF Process Diagram"



9.11.2 P11.2 – CLINIC—DETENTION CENTER COORDINATION OF CARE

- **Triggering Events/Actions**
 - Care for the Juvenile is needed in the Housing Unit.
- **Involved Entities**
 - Juvenile Detention Clinic RN/Provider
 - Juvenile Detention Center Officer (JDO)
- **Pre-conditions**
 - Juvenile has been previously examined in the Clinic.
- **Inputs**
 - Medical Recommendation Form
 - Medicine Use Log
 - Detention Medication Form
 - Various Educational Sheets
 - Diabetic Flow Sheet For Detention
 - ACCU-Check Unit Sign In/Out Record
 - MAR
 - Juvenile Chart
- **Description**
 - During this process the Clinic provides the medical recommendations to be followed by the Housing Unit, outside the Clinic working hours, while the Juvenile is in detention.
 - The process finishes the next day, with the Clinic's RN updating the Juvenile Chart to incorporate any care offered to Juvenile in the Housing Unit.
- **Business Rules – NONE**
- **Calculations – NONE**
- **Outputs**
 - Medical Recommendation Form—Completed
 - Medicine Use Log—Completed
 - Detention Medication Form—Completed
 - Diabetic Flow Sheet For Detention—Completed
 - ACCU-Check Unit Sign In/Out Record—Updated
 - MAR—Updated
 - Juvenile Chart—Updated
- **Post-conditions**
 - Juvenile's recommended care has been followed in the Housing Unit.

Figure 73: C As-Is P11.2 "Clinic-Detention Center Coordination Of Care Process Diagram"

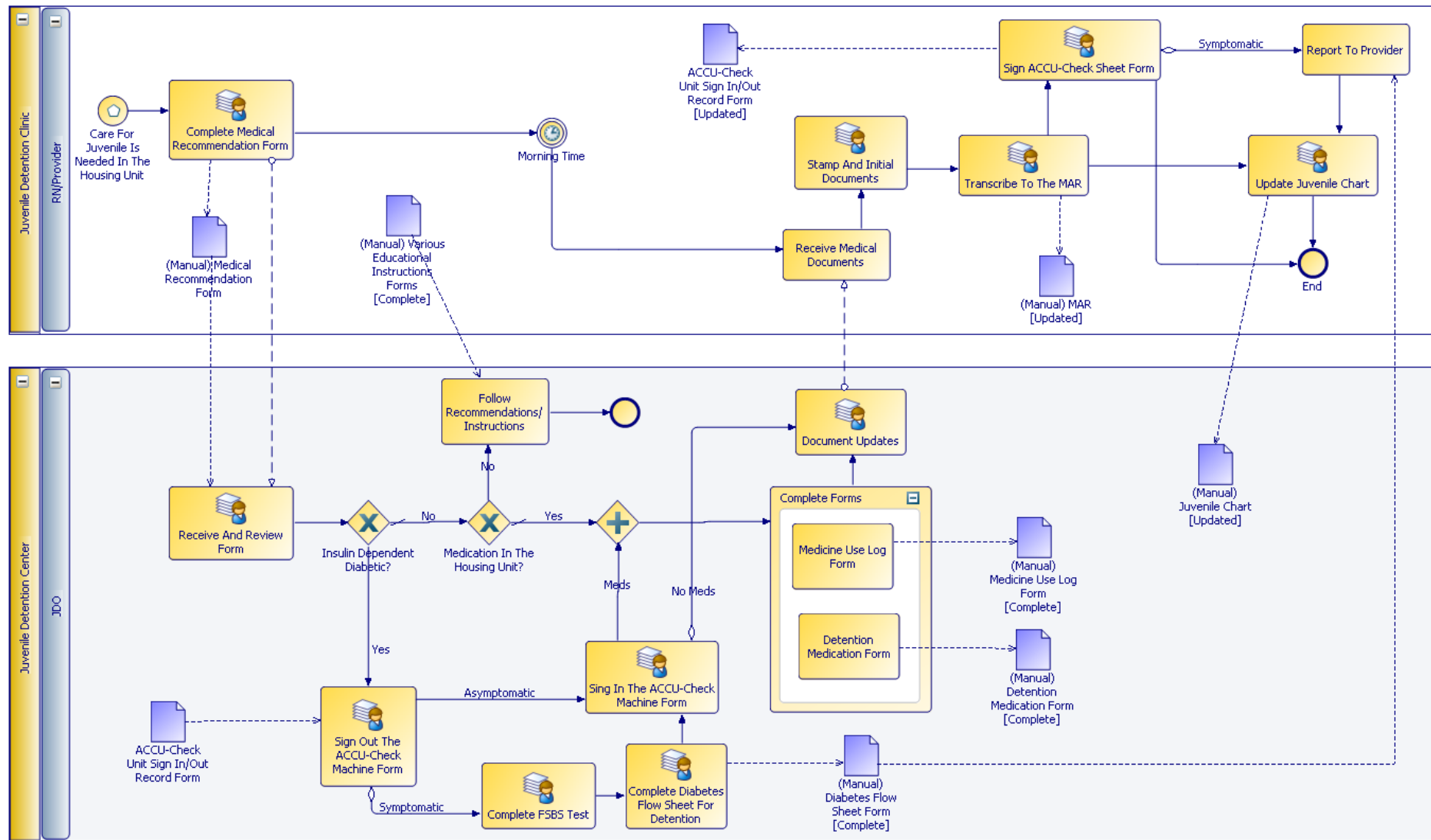
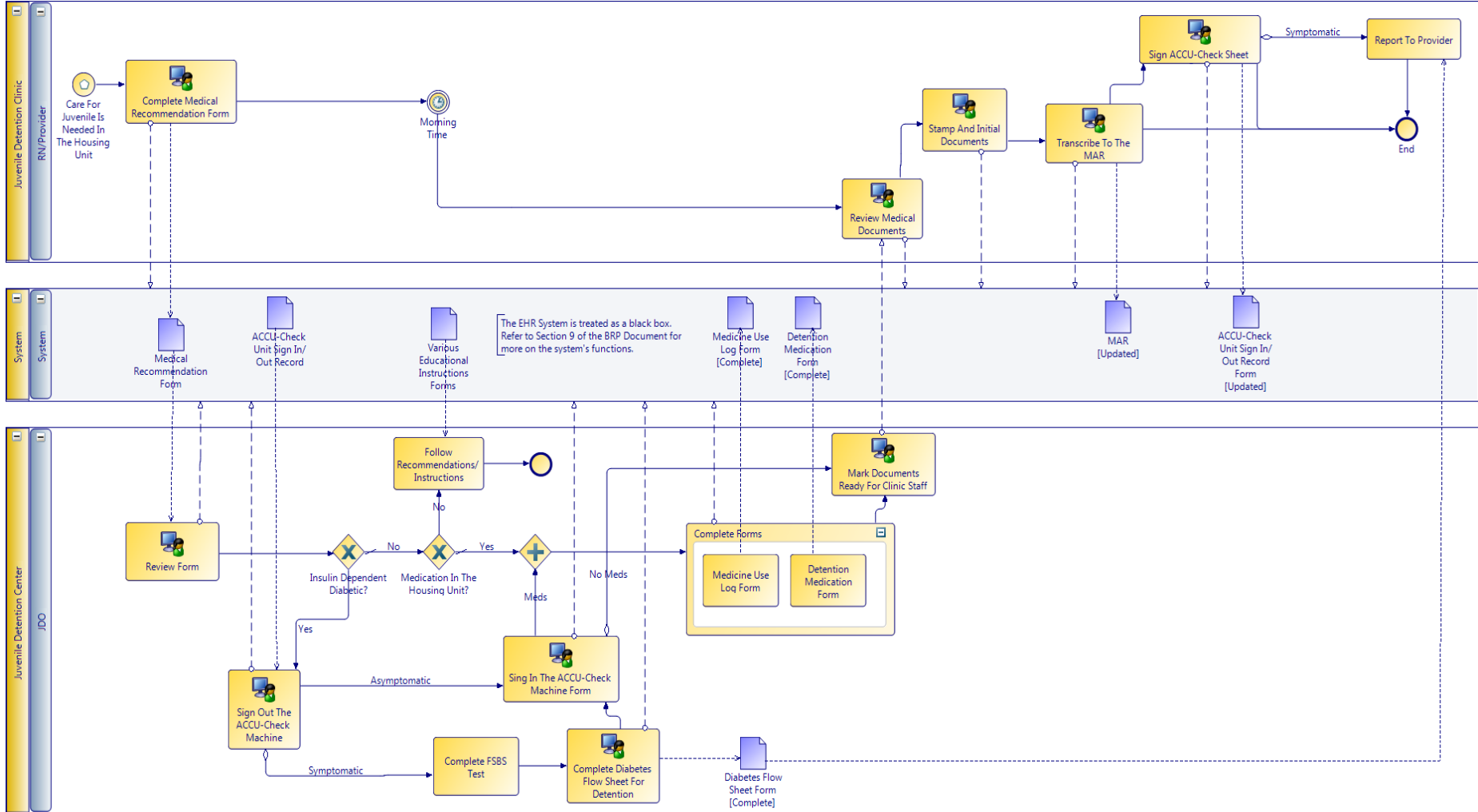


Figure 74: C To-Be P11.2 "Clinic-Detention Center Coordination Of Care Process Diagram"



- **Triggering Events/Actions**
 - Medical care for the Juvenile has been recommended after release.
- **Involved Entities**
 - Juvenile Detention Clinic RN
 - Guardian
 - Juvenile Detention Center Officer (JDO)
- **Pre-conditions**
 - Provider Sick Call process has been completed for the Juvenile.
- **Inputs**
 - Letter to Guardian for Continuity of Care
 - Delivery Receipt Form
 - Juvenile Chart
- **Description**
 - During this process the Clinic makes the necessary arrangements so that the Juvenile can continue to receive Medical Care after release from detention.
- **Business Rules**
 - **The JDO must sign off the Delivery Receipt Form.**
- **Calculations – NONE**
- **Outputs**
 - Letter to Guardian for Continuity of Care – Completed
 - Delivery Receipt Form – Completed
 - Juvenile Chart – Updated
- **Post-conditions**
 - The Guardian has received the Provider’s recommendation for follow-up medical care after Juvenile’s release.

Figure 75: C-As-Is P11.3 "Clinic-Guardian Coordination Of Care Process Diagram"

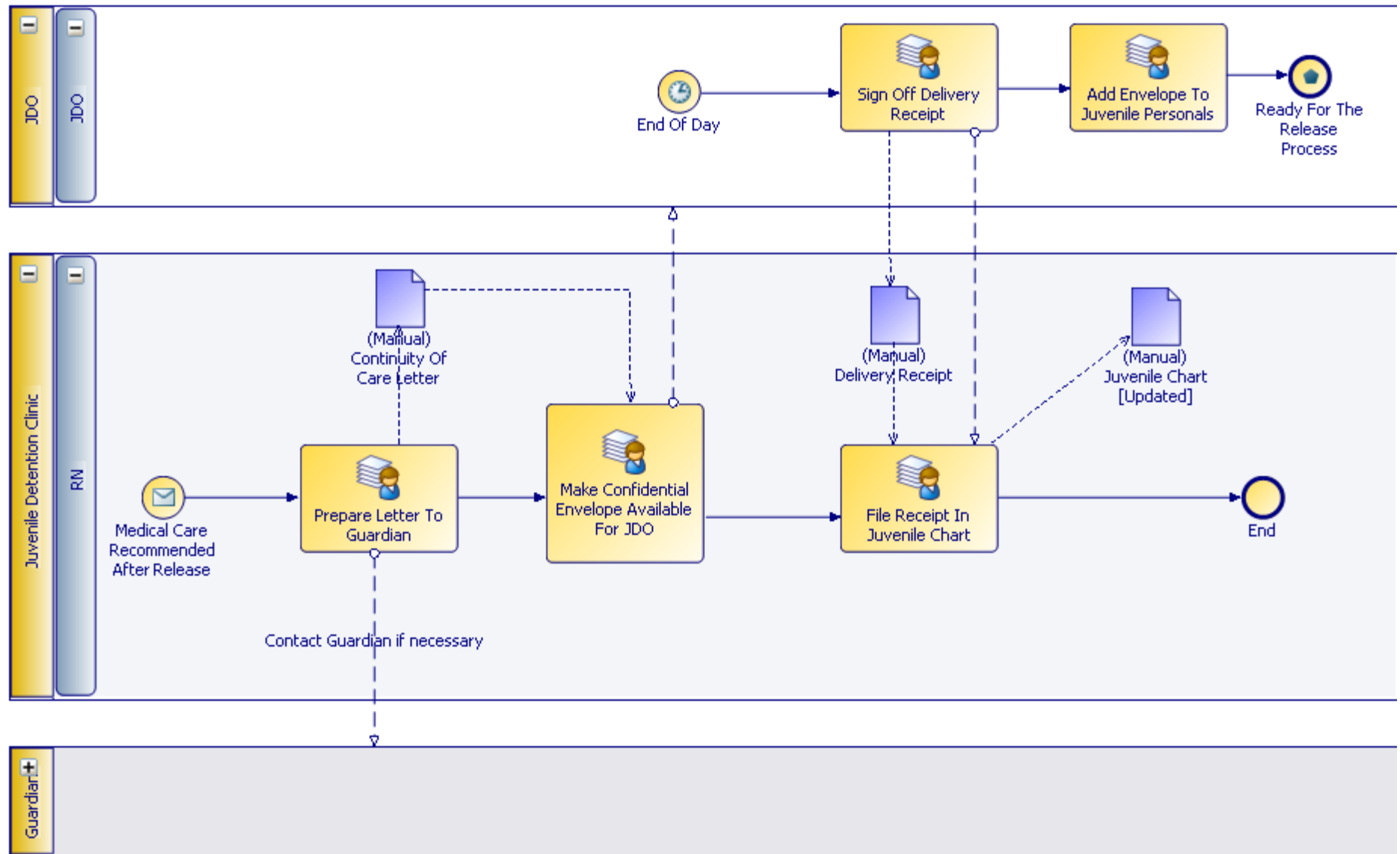
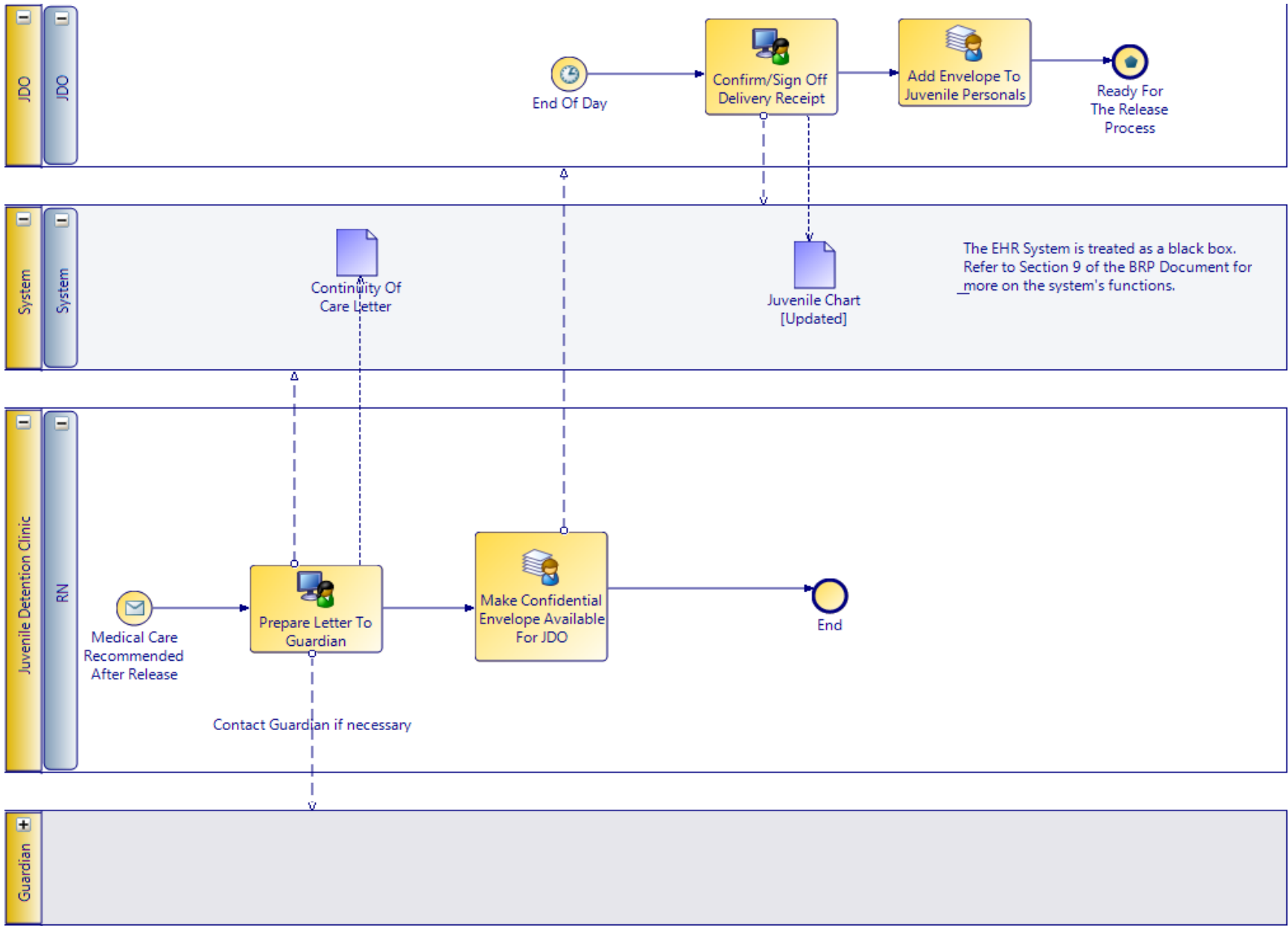


Figure 76: C To-Be P11.3 "Clinic-Guardian Coordination Of Care Process Diagram"



9.11.4 C P11.4 – REQUEST CONTINUITY OF CARE RECORDS

- **Triggering Events/Actions**
 - Past medical records are needed by the Juvenile Detention Clinic for continuity of care purposes.
- **Involved Entities**
 - Juvenile Detention Clinic Secretary (HUC)
 - Guardian
 - Outside Medical Facility
- **Pre-conditions**
 - One of the following processes has been completed:
 - Provider Order Process
 - Nurse Intake Process
 - One of the following processes has been initiated:
 - ER Referrals Process
 - Continuity Of Care Sub-Specialty Visits Process
- **Inputs**
 - Fax Sheet Request for Medical Records
 - Authorization for Release of Medical Information Form
 - Juvenile’s past medical records
 - Juvenile Chart
- **Description**
 - During this process the Clinic proceeds to receive the Juvenile’s medical records required for continuity of care purposes.
- **Business Rules**
 - Preserve patient’s medical confidentiality at all times, as per HIPPA rules.
 - The Authorization for Release of Medical Information Form must be signed by the Guardian.
- **Calculations – NONE**
- **Outputs**
 - Authorization for Release of Medical Information Form – Completed
 - Juvenile Chart – Updated
- **Post-conditions**
 - Juvenile’s past medical records are ready for review by the Provider.

Figure 77: C As-Is P11.4 "Request Continuity Of Care Records Process Diagram"

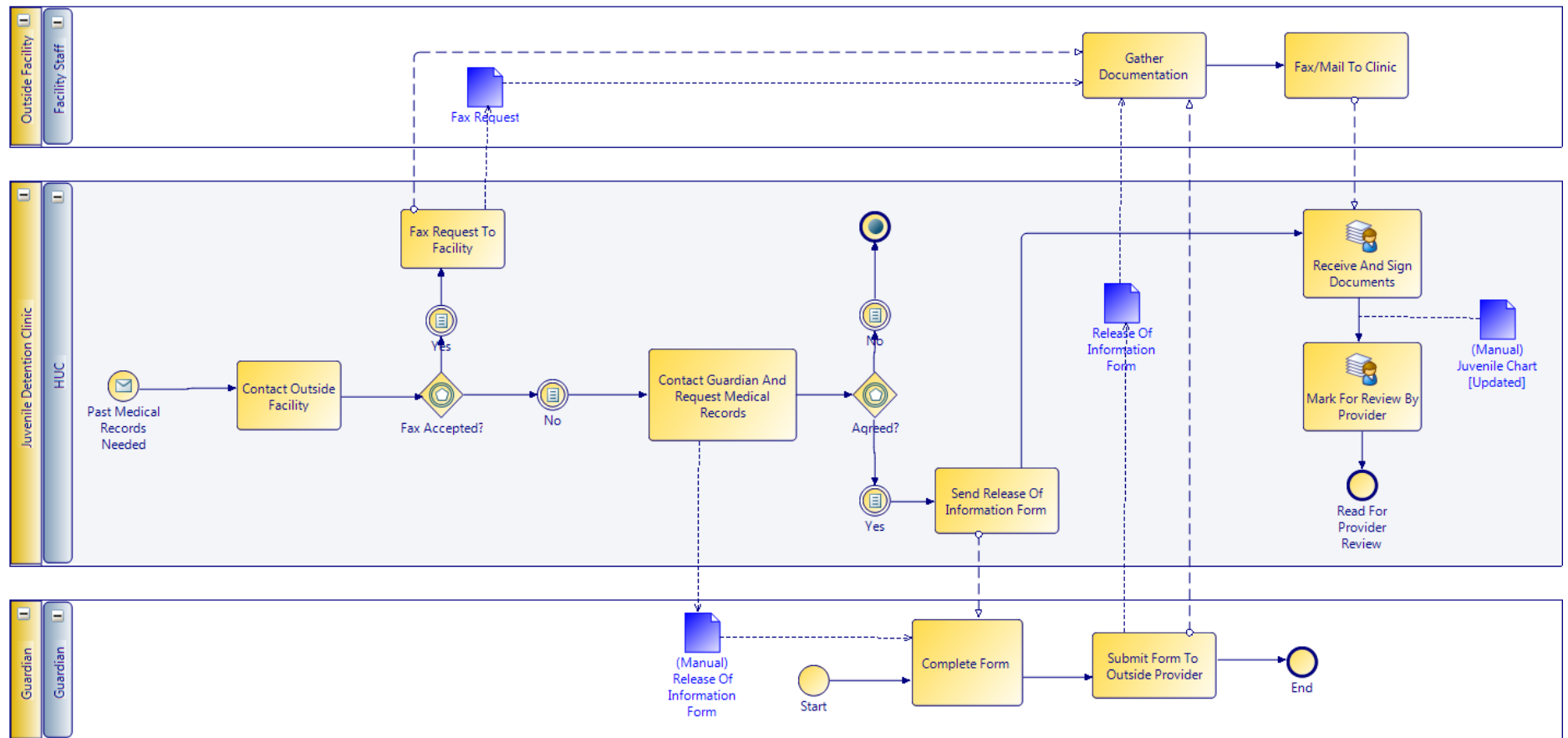
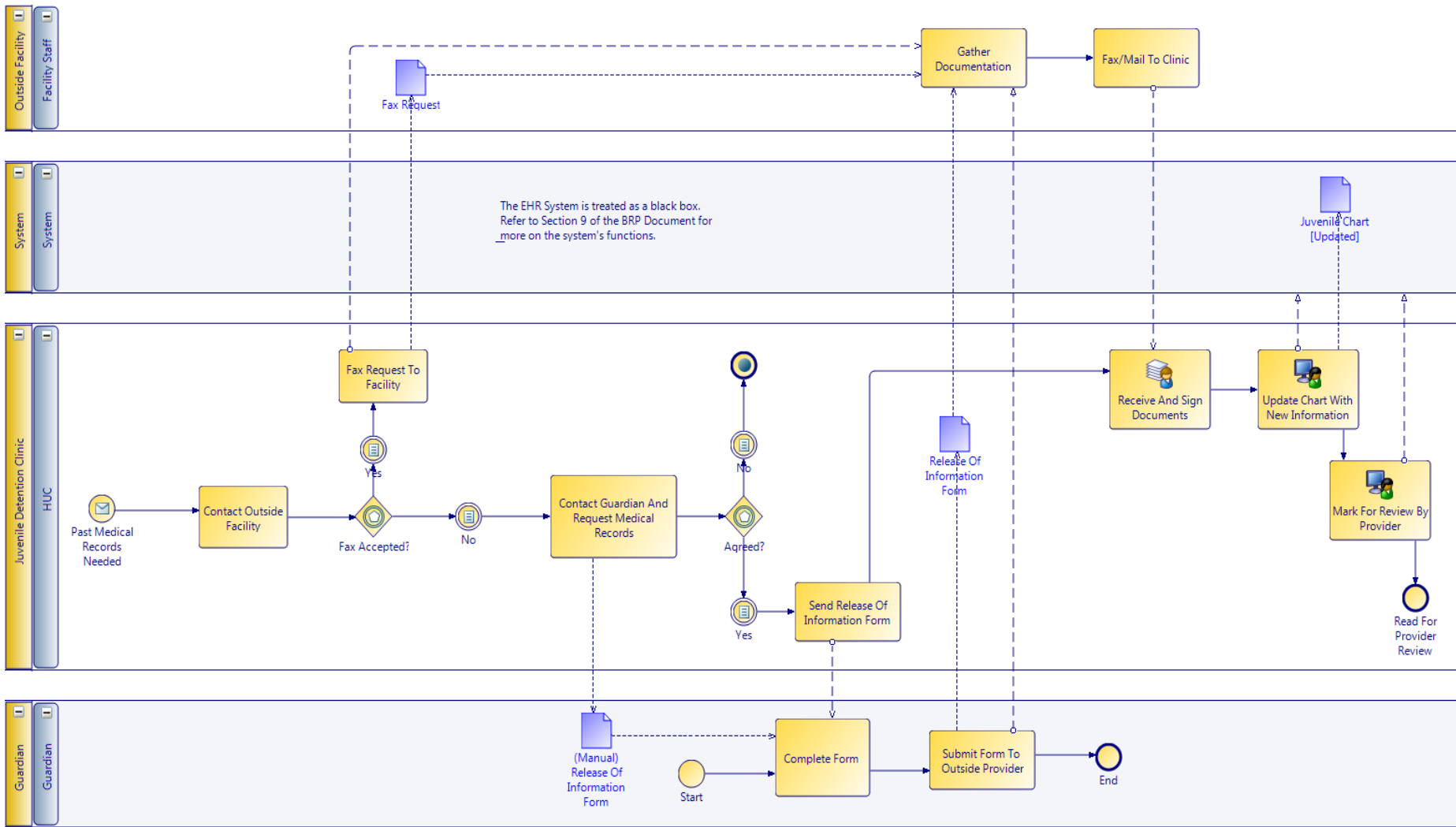


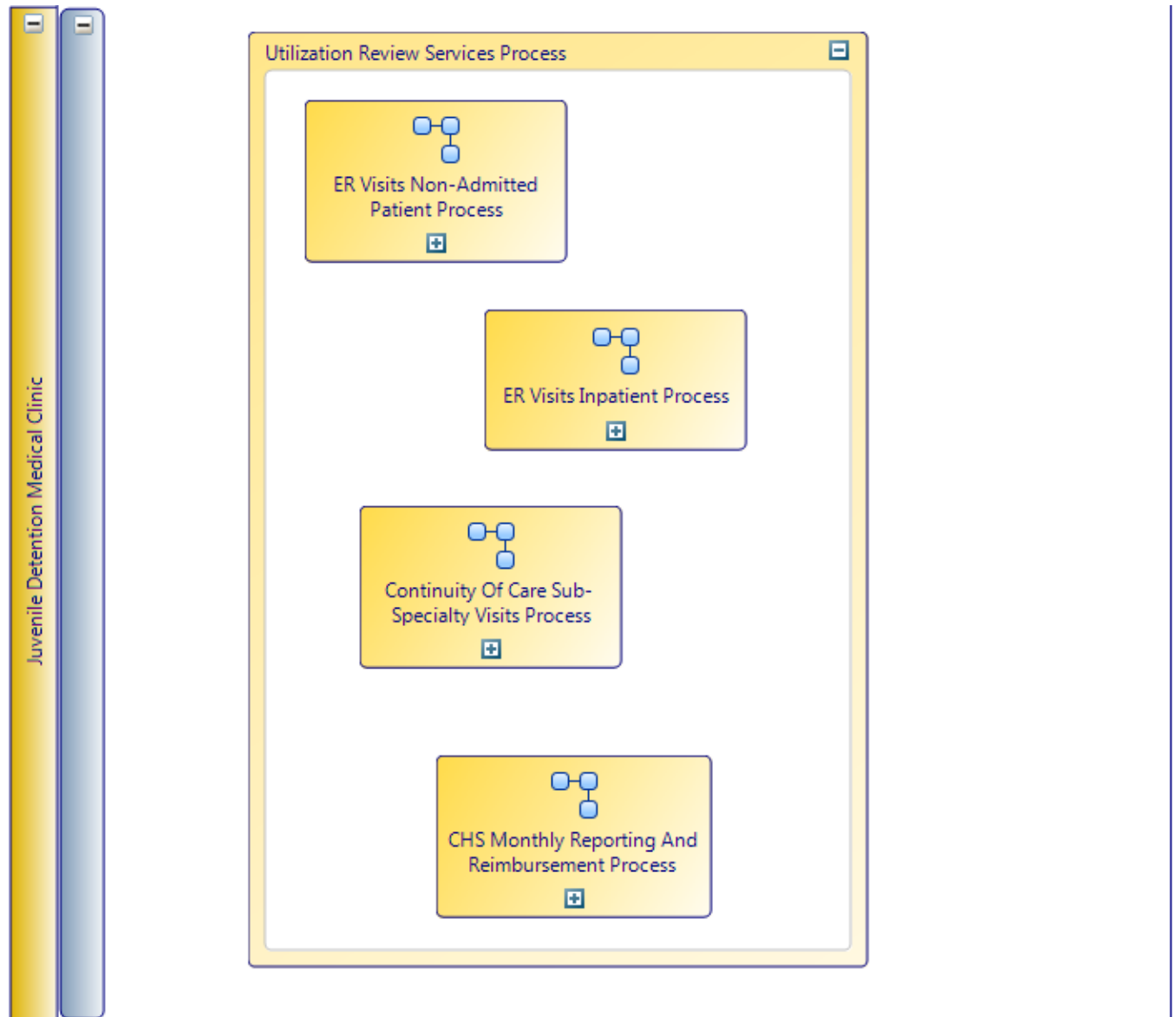
Figure 78: C To-Be P11.4 "Request Continuity Of Care Records Process Diagram"



- **Triggering Events/Actions**
 - Medical services other than those provided by the Medical Clinic have been, or are being provided to Juveniles in need via the External Referrals.
- **Involved Entities**
 - Any entities involved in either of the following sub-processes:
 - ER Visits Non-Admitted Patient Process
 - ER Visits Inpatient Process
 - Continuity Of Care Sub-Specialty Visits Process
 - CHS (Correctional Health Services) Monthly Reporting And Reimbursement Process
- **Pre-conditions**
 - Any preconditions pertaining to any of the sub-processes listed below apply:
 - ER Visits Non-Admitted Patient Process
 - ER Visits Inpatient Process
 - Continuity Of Care Sub-Specialty Visits Process
 - CHS (Correctional Health Services) Monthly Reporting And Reimbursement Process
- **Inputs**
 - Any inputs pertaining to any of the following sub-processes:
 - ER Visits Non-Admitted Patient Process
 - ER Visits Inpatient Process
 - Continuity Of Care Sub-Specialty Visits Process
 - CHS (Correctional Health Services) Monthly Reporting And Reimbursement Process
- **Description**
 - The purpose of the activities pertaining to the Utilization Review (Management) processes is to determine the medical necessity of the services being provided to Juveniles.
 - Based on the necessity criteria, the services rendered are either approved, or denied by the Medical Clinic.
 - For the approved services, either the Clinic, or another provider, pays partially or fully.
- **Business Rules**
 - Any business rules pertaining to any of the sub-processes listed below apply:
 - ER Visits Non-Admitted Patient Process
 - ER Visits Inpatient Process
 - Continuity Of Care Sub-Specialty Visits Process
 - CHS (Correctional Health Services) Monthly Reporting And Reimbursement Process
- **Calculations – NONE**
- **Outputs**
 - Any outputs pertaining to any of the following sub-processes:
 - ER Visits Non-Admitted Patient Process
 - ER Visits Inpatient Process
 - Continuity Of Care Sub-Specialty Visits Process
 - CHS (Correctional Health Services) Monthly Reporting And Reimbursement Process

- Request Continuity Of Care Records Process
- **Post-conditions**
 - Any post conditions pertaining to any of the sub-processes listed below apply:
 - ER Visits Non-Admitted Patient Process
 - ER Visits Inpatient Process
 - Continuity Of Care Sub-Specialty Visits Process
 - CHS (Correctional Health Services) Monthly Reporting And Reimbursement Process

Figure 79: C As-Is P12 "Utilization Review Process Diagram"



9.12.1 C P12.1 – ER VISITS NON-ADMITTED PATIENT

- **Triggering Events/Actions**
 - Beginning of the business day.
- **Involved Entities**
 - Juvenile Detention Clinic UR Nurse
 - CHS Website
- **Pre-conditions**
 - The ER Referrals process has been completed
 - Juvenile has not been admitted to the Hospital
 - Juvenile appears in Pending Review Status on the CHS Website
- **Inputs**
 - Email to the UR Nurse from the RN or Detention Supervisor.
 - ICQ Form – Completed
 - CHS List of Juveniles in Pending Review Status
 - CHS Prior Authorization Detail Form
- **Description**
 - During this process the Clinic’s Utilization Review Nurse identifies the payment-responsible-party for the medical services rendered to Juvenile(s).
- **Business Rules**
 - Every time Juveniles are sent to the Emergency Room, the UR Nurse must receive a notification email from:
 - The RN, for visits before 7 pm
 - The Detention Center Supervisor, for visits after 7 pm
- **Calculations – NONE**
- **Outputs**
 - Excel ER Inpatient File (database) – Updated
 - CHS Prior Authorization Detail Form – Completed
 - Consultation Binder – Updated
- **Post-conditions**
 - The payment-responsible-party for the ER visit has been determined and the medical services provided are ready to be paid.

Figure 80: C As-Is P12.1 "ER Visit Non-Admitted Patient Process Diagram"

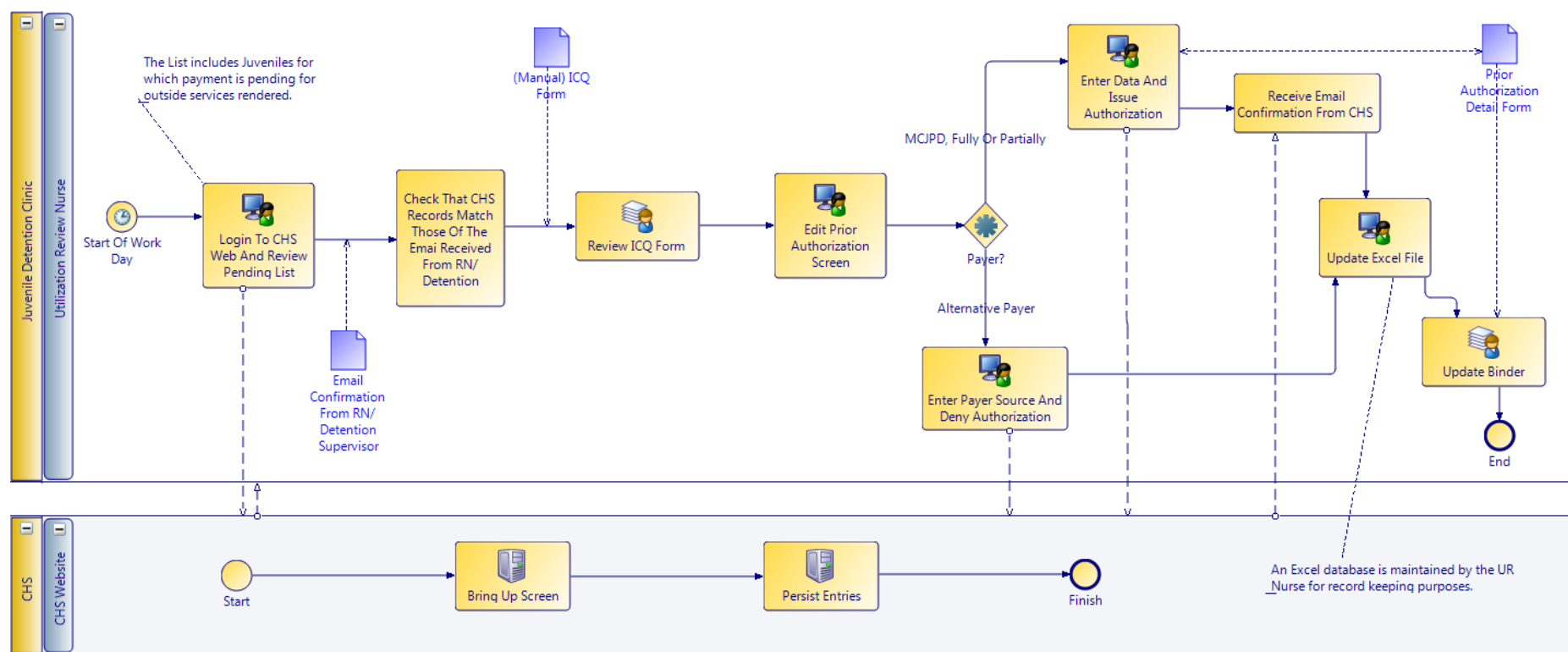
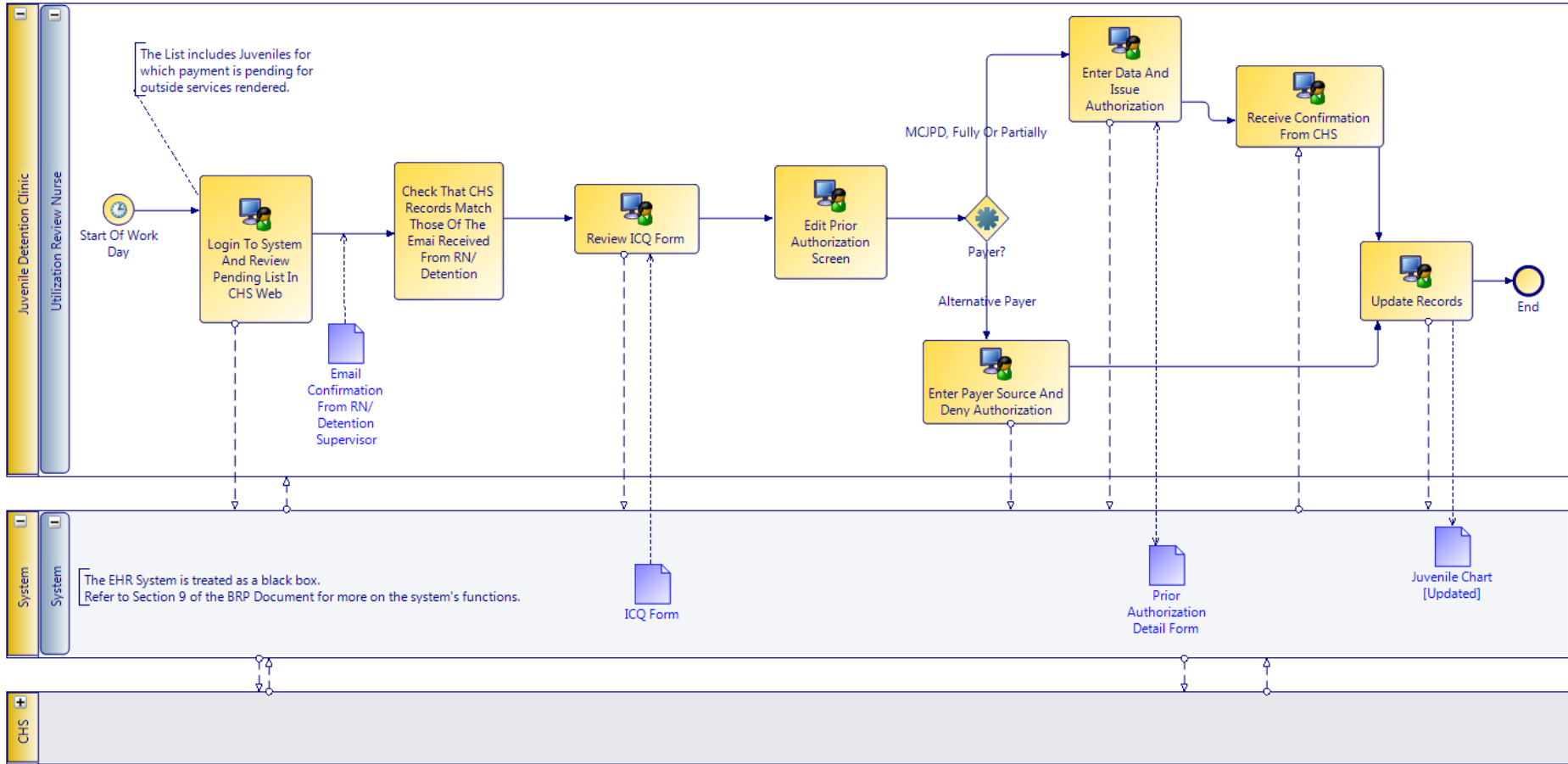


Figure 81: C To-Be P12.1 "ER Visit Non-Admitted Patient Process Diagram"



- **Triggering Events/Actions**
 - Beginning of the business day.
- **Involved Entities**
 - Juvenile Detention Clinic UR Nurse
 - Juvenile Detention Clinic Medical Director
 - CHS Website
 - Outside Hospital Facility UR Nurse
 - Any other entities, not listed above, involved in either of the following sub-processes:
 - ER Visits Non-Admitted Patient Process
- **Pre-conditions**
 - The ER Referrals process has been completed
 - Juvenile has been admitted to the Hospital
 - Juvenile appears in Pending Review Status on the CHS Website
- **Inputs**
 - CHS Utilization Form
 - Juvenile Medical Records from the Outside Hospital Facility – Complete
 - Denial Letter
 - Utilization Review Criteria Manual
 - Consultation Binder
 - Juvenile Chart
 - Any other inputs, not listed above, involved in either of the following sub-processes:
 - ER Visits Non-Admitted Patient Process
- **Description**
 - The initial steps which take place during this process are the same as in the ER Visits Non-Admitted Patient process.
 - In this scenario, the Juvenile status appears as “Admitted” on the CHS website and the Clinic’s UR Nurse proceeds with daily reviews on the medical necessity of the hospital stay for the Juv.
- **Business Rules**
 - Any rules applicable to the ER Visits Non-Admitted Patient Process apply.
- **Calculations – NONE**
- **Outputs**
 - CHS Utilization Form – Completed
 - Denial Letter – Complete
 - Consultation Binder – Updated
 - Juvenile Chart – Updated
 - Any other inputs, not listed above, involved in either of the following sub-processes:
 - ER Visits Non-Admitted Patient Process
- **Post-conditions**
 - The medical necessity of Juvenile’s Hospital stay has been determined, and the medical services provided are/are not ready to be paid.


```

graph TD
    subgraph Medical_Director [Medical Director]
        Start((Start)) --> BringUpScreen[Bring Up Screen]
        BringUpScreen --> PersistEntries[Persist Entries]
        PersistEntries --> Finish((Finish))
    end

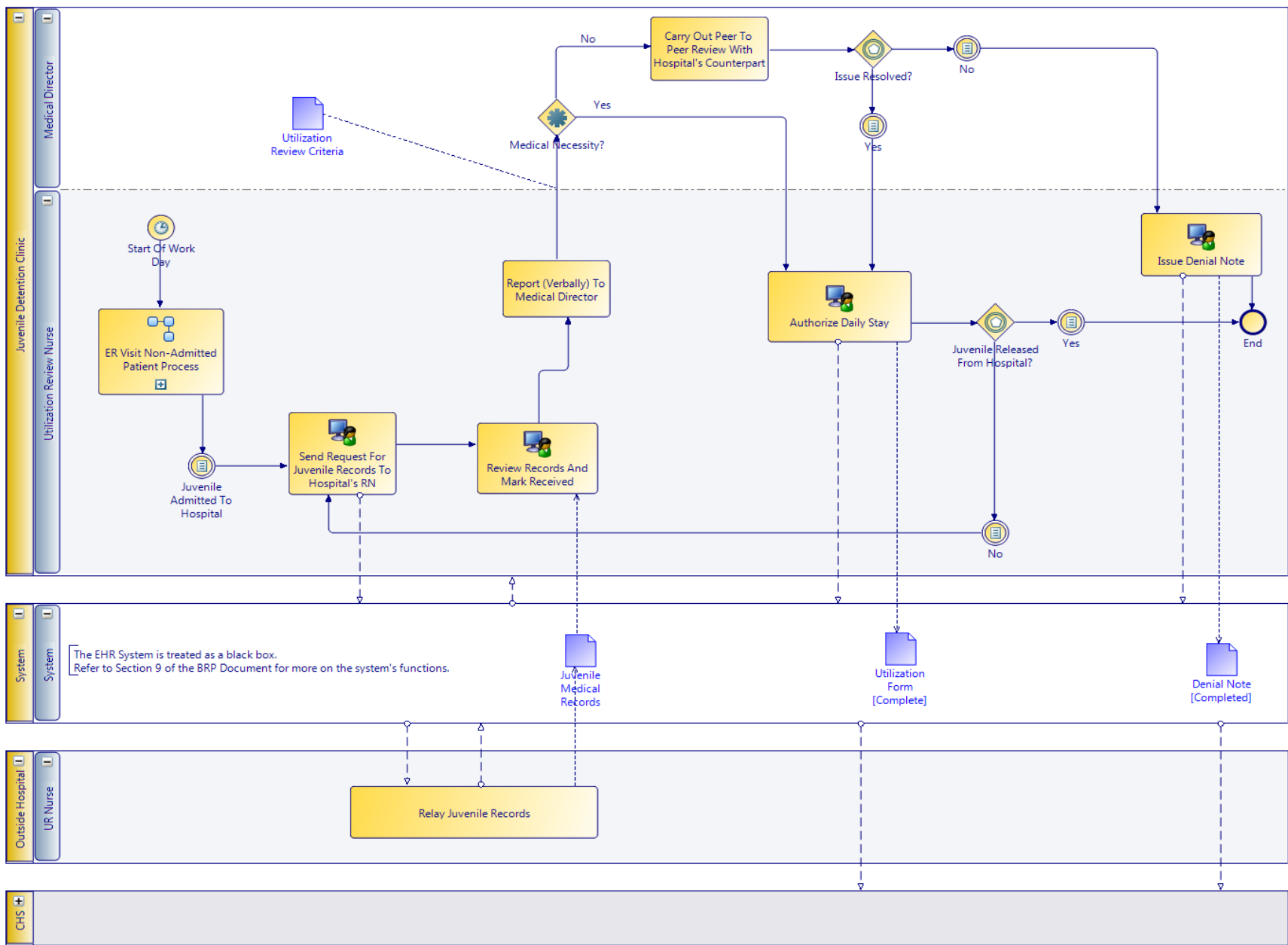
    subgraph Juvenile_Detention_Clinic [Juvenile Detention Clinic]
        StartOfWorkDay((Start Of Work Day)) --> ERVisit[ER Visit Non-Admitted Patient Process]
        ERVisit --> Admitted((Juvenile Admitted To Hospital))
        Admitted --> RequestRecords[Request Juvenile Records From Hospital's RN]
        RequestRecords --> ReviewStamp[Review And Stamp Records]
        ReviewStamp --> ReportVerbal[Report (Verbally) To Medical Director]
        ReportVerbal --> MedicalNecessity{Medical Necessity?}
        MedicalNecessity -- No --> PeerReview[Carry Out Peer To Peer Review With Hospital's Counterpart]
        PeerReview --> IssueResolved{Issue Resolved?}
        IssueResolved -- No --> IssueDenialLetter[Issue Denial Letter]
        IssueResolved -- Yes --> AuthorizeStay[Authorize Daily Stay]
        MedicalNecessity -- Yes --> AuthorizeStay
        AuthorizeStay --> Released{Juvenile Released From Hospital?}
        Released -- No --> UpdateBinder[Update Consultation Binder]
        Released -- Yes --> UpdateChart[Update Juvenile Chart]
        UpdateChart --> UpdateBinder
        UpdateBinder --> End((End))
    end

    subgraph Outside_Hospital [Outside Hospital]
        FaxRecords[Fax Juvenile Records]
    end

    RequestRecords -.-> FaxRecords
    ReviewStamp -.-> FaxRecords
    FaxRecords -.-> RequestRecords
    FaxRecords -.-> UpdateBinder

    UtilizationCriteria[Utilization Review Criteria] -.-> MedicalNecessity
    ManualDenialLetter[(Manual) Denial Letter [Completed]] -.-> IssueDenialLetter
    ManualMedicalRecords[(Manual) Juvenile Medical Records] -.-> ReviewStamp
    UtilizationFormComplete[Utilization Form [Complete]] -.-> UpdateBinder
  
```

Figure 83: C To-Be P12.2 "ER Visit Inpatient Process Diagram"



9.12.3 C P12.3 – CHS MONTHLY REPORTING AND REIMBURSEMENT

- **Triggering Events/Actions**
 - Email from CHS to the Clinic's UR Nurse
 - The email contains a flat file with Juvenile claims for which the Clinic is responsible.
- **Involved Entities**
 - Juvenile Detention Clinic UR Nurse
 - Access Database
 - Excel Database
- **Pre-conditions**
 - ER Visit Inpatient Process has been Initiated, or
 - Continuity Of Care Sub-Specialty Visits Process has been completed, or
 - ER Visit Non-Admitted Patient Process has been completed.
- **Inputs**
 - Flat File containing Juvenile claims from CHS
 - Excel Database File
 - Access Database Forms
- **Description**
 - During this process the Clinic's Utilization Review Nurse verifies that the Clinic is the responsible party for payments made for treated Juveniles and proceeds with reimbursing CHS.
 - The payment is denied when the Clinic is not the responsible party.
- **Business Rules – NONE**
- **Calculations – NONE**
- **Outputs**
 - Pivot Table for Courts' Finance Department (containing the approved/denied claims)
 - Reports for the Clinic's Medical Director
- **Post-conditions**
 - Payment transactions are ready for the Finance Department's follow-up.

Figure 84: C As-Is P12.3 "CHS Monthly Reporting And Reimbursement Process Diagram"

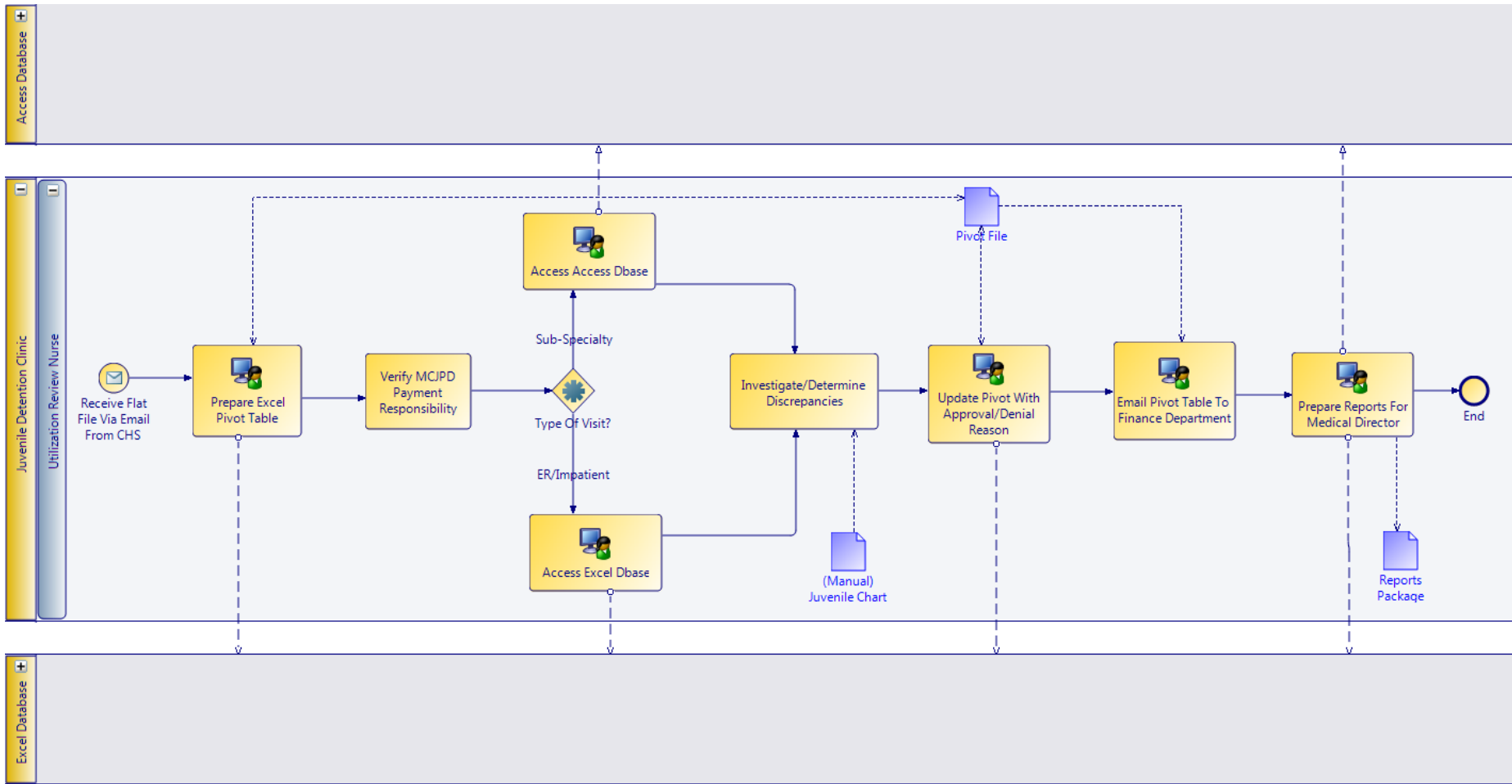
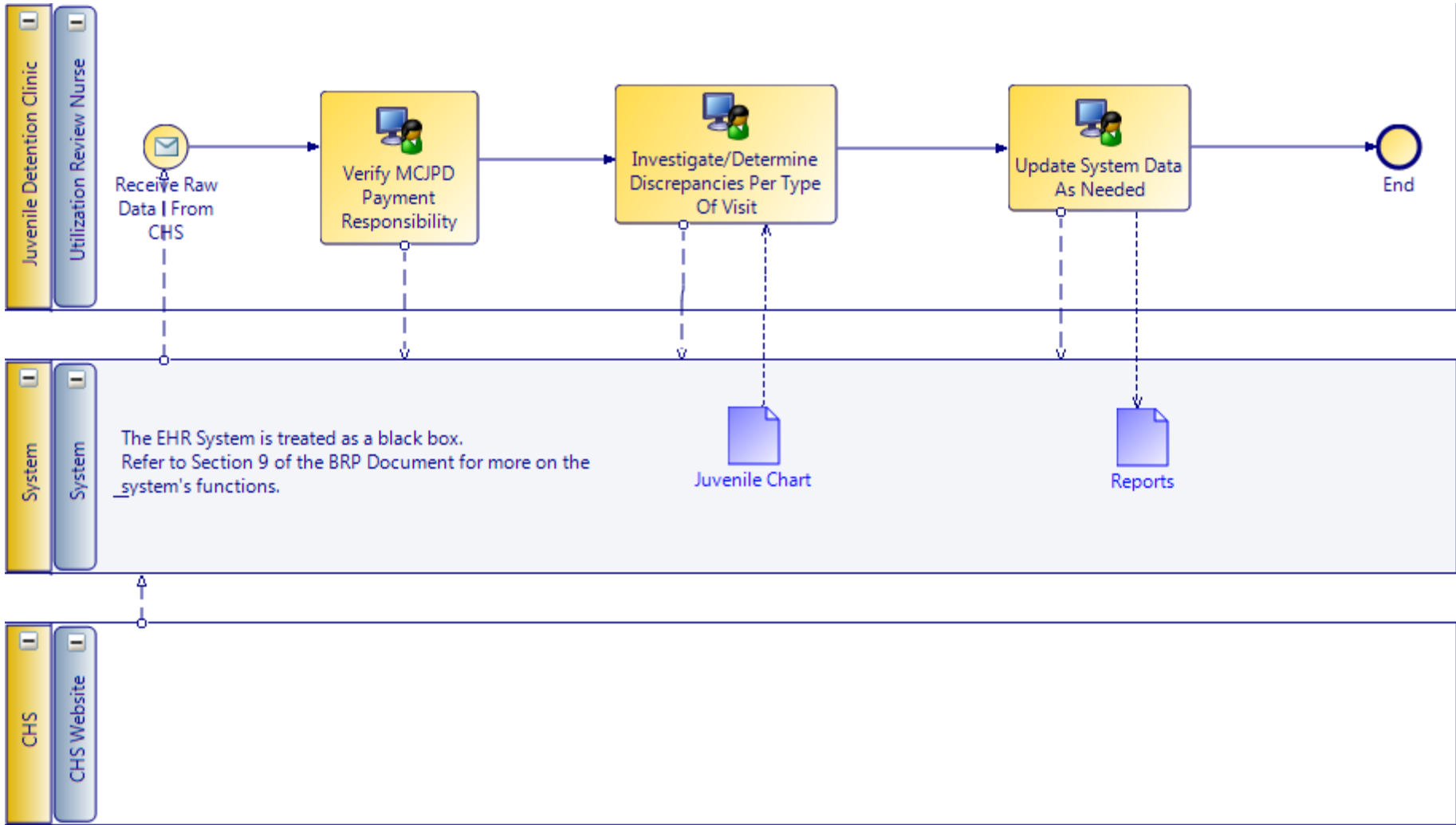
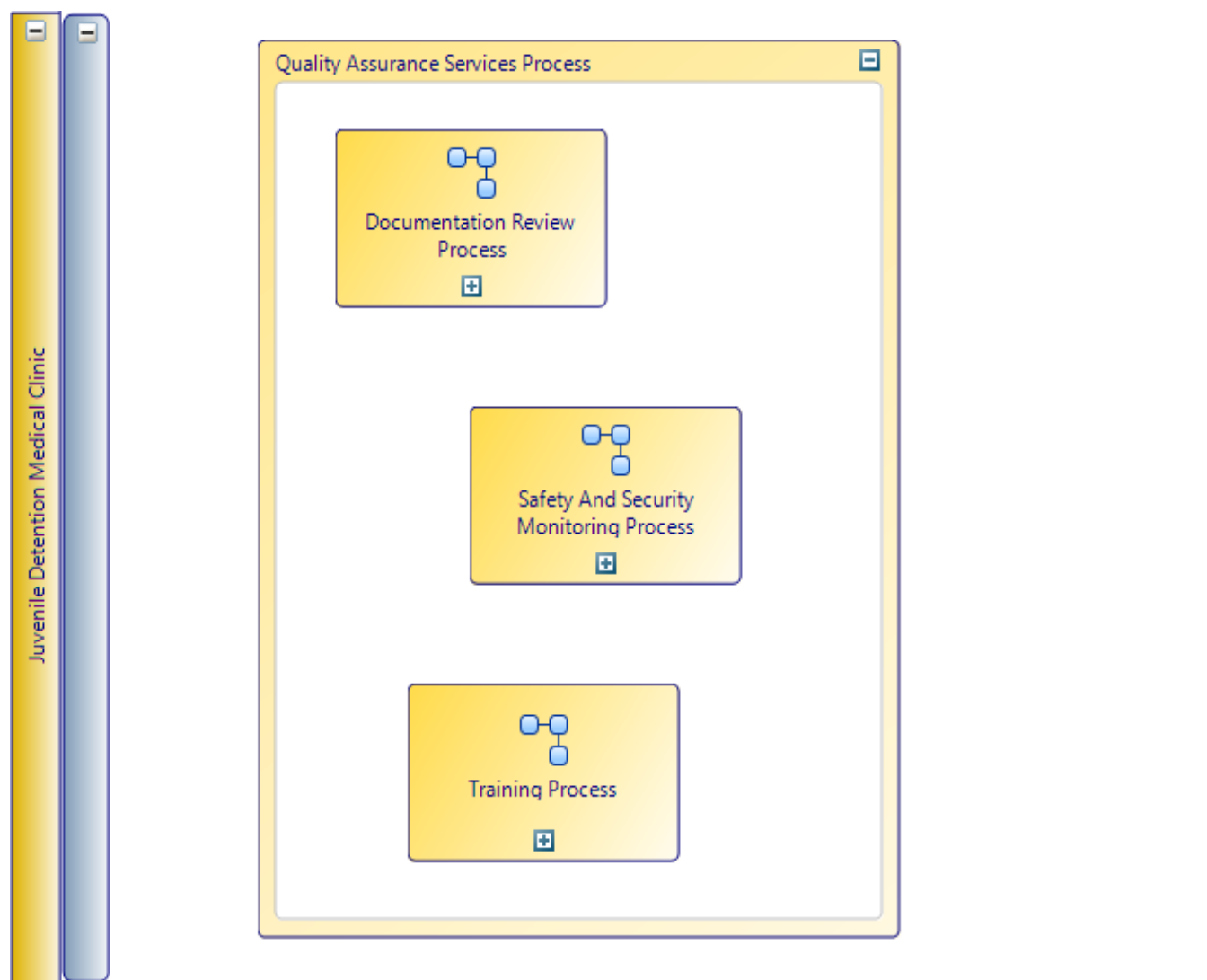


Figure 85: C To-Be P12.3 "CHS Monthly Reporting And Reimbursement Process Diagram"



- **Triggering Events/Actions**
 - End of month.
- **Involved Entities**
 - Any entities involved in either of the following sub-processes:
 - Documentation Review Process
 - Safety And Security Process
 - Training Process
- **Pre-conditions**
 - Any preconditions pertaining to any of the sub-processes listed below apply:
 - Documentation Review Process
 - Safety And Security Process
 - Training Process
- **Inputs**
 - Any inputs pertaining to any of the following sub-processes:
 - Documentation Review Process
 - Safety And Security Process
 - Training Process
- **Description**
 - The Quality Assurance processes include internal self-monitoring activities to ensure that the Clinic:
 - provides quality medical care
 - meets and/or exceeds the community standards
- **Business Rules**
 - Any business rules pertaining to any of the sub-processes listed below apply:
 - Documentation Review Process
 - Safety And Security Process
 - Training Process
- **Calculations – NONE**
- **Outputs**
 - Any outputs pertaining to any of the following sub-processes:
 - Documentation Review Process
 - Safety And Security Process
 - Training Process
- **Post-conditions**
 - Any post conditions pertaining to any of the sub-processes listed below apply:
 - Documentation Review Process
 - Safety And Security Process
 - Training Process

Figure 86: C As-Is P13 "Quality Assurance Process Diagram"



9.13.1 C P13.1 – DOCUMENTATION REVIEW

- **Triggering Events/Actions**
 - End of month.
- **Involved Entities**
 - QA Nurse
 - Clinic Management Team
 - Medical Director
 - Nurse Clinic Manager
 - Clinic Staff Members
 - RN
 - JHT
 - HUC
- **Pre-conditions**
 - Clinical processes have been documented as per the guidelines and are ready for review.
- **Inputs**
 - Juvenile Chart
 - RN Quality Assurance Binder
 - Emergency Cart Quality Assurance Record Form -- Complete
 - Monthly Quality Assessment For The Med Room Form -- Complete
 - Accu-Chek Machine And Test Strip Quality Assurance Log -- Complete
 - Mock Code Review Form -- Complete
 - Refrigerator/Freezer Temperature Log -- Complete
 - JHT Quality Assurance Binder
 - Daily Quality Assurance Form For Patient Care Areas -- Complete
 - Bayer Multi-Stix 10SG Quality Control Log -- Complete
 - Laboratory Refrigerator Temperature Log -- Complete
 - Quality Assurance Clinic Monitor Form -- Blank
 - Quality Assurance Exam Room Checklist Form -- Blank
 - Medical Chart Quality Assurance Form -- Blank
 - Quality Assurance Form For JHT -- Blank
 - RN Clinical Skills Assessment QA Form -- Blank
 - NP Clinical Skills Assessment QA Form -- Blank
- **Description**
 - During this process the Clinic's Quality Assurance Nurse ensures that the Clinic's policies and procedures are being followed as written.
- **Business Rules**
 - Any issues found that could compromise care will be addressed on the spot.
- **Calculations – NONE**
- **Outputs**
 - Quality Assurance Clinic Monitor Form -- Completed
 - Quality Assurance Exam Room Checklist Form -- Completed

- Medical Chart Quality Assurance Form -- Completed
 - Quality Assurance Form For JHT -- Completed
 - RN Clinical Skills Assessment QA Form -- Completed
 - NP Clinical Skills Assessment QA Form -- Completed
- **Post-conditions**
 - Quality Assurance forms are ready for review by the Clinic's Management Team.

Figure 87: C As-Is P13.1 "Documentation Review Process Diagram"

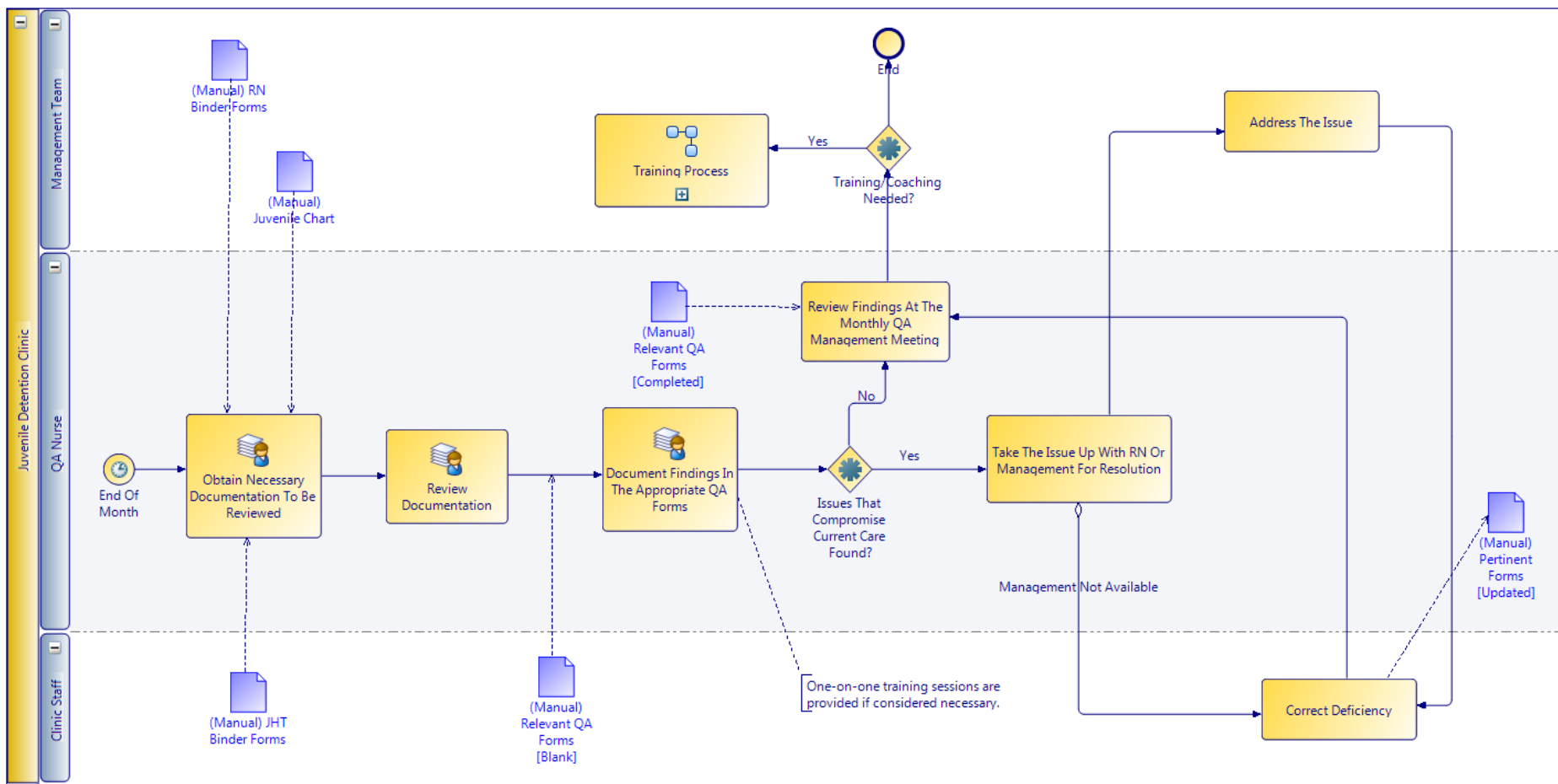
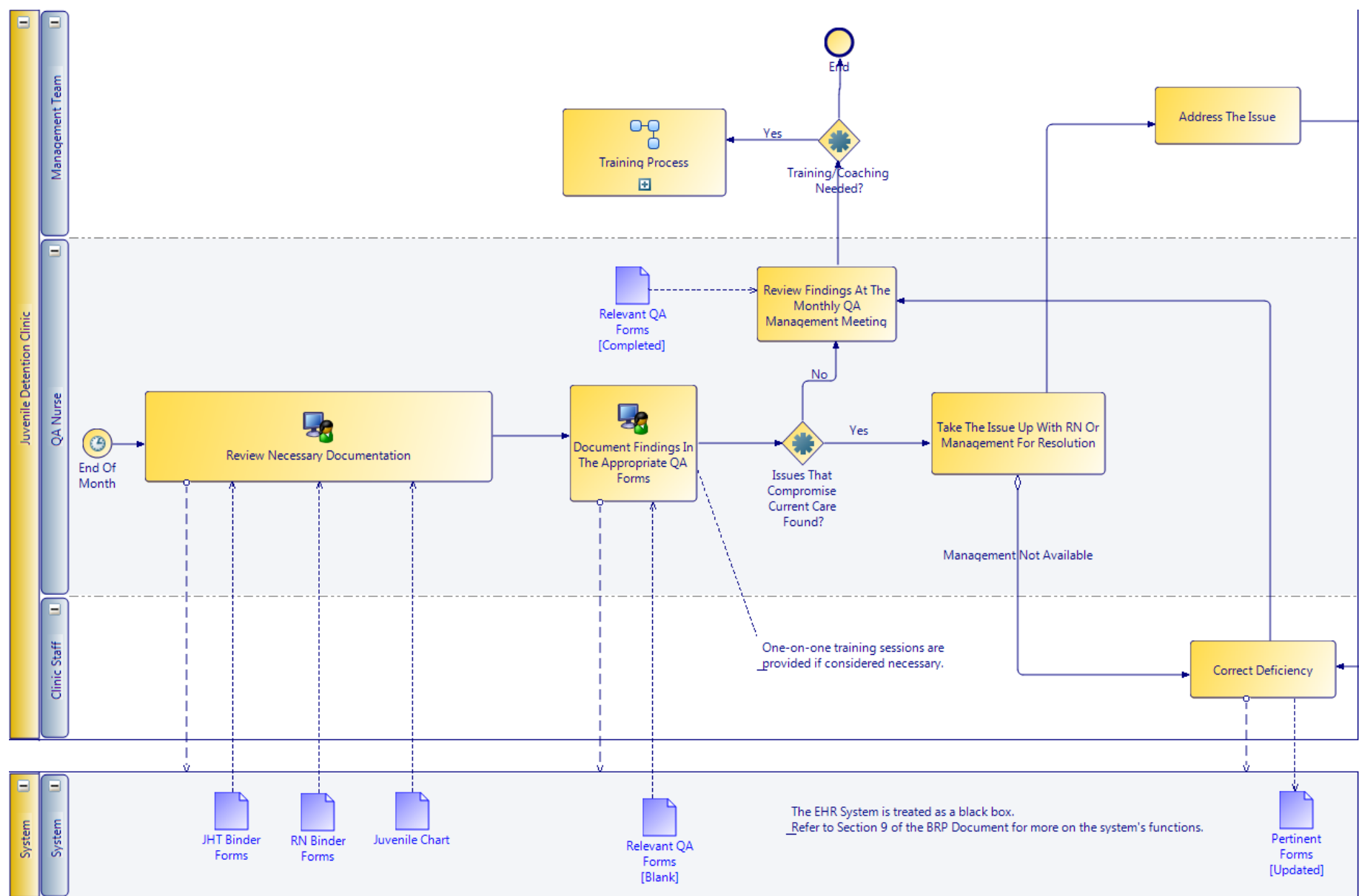


Figure 88: C To-Be P13.1 "Documentation Review Process Diagram"



- **Triggering Events/Actions**
 - End of month.
- **Involved Entities**
 - QA Nurse
 - Clinic Management Team
 - Medical Director
 - Nurse Clinic Manager
- **Pre-conditions**– NONE
- **Inputs**
 - Quality Assurance Clinic Monitor Form -- Blank
 - Quality Assurance Exam Room Checklist Form -- Blank
 - Emergency Cart Quality Assurance Record -- Completed
- **Description**
 - During this process the Clinic's Quality Assurance Nurse checks to ensure that:
 - the Detention Facility's policies and procedures are maintained throughout the Clinic
 - the clinical equipment has been calibrated and is working properly
 - the supply stock levels are maintained
- **Business Rules**
 - Any safety/security risks must be addressed immediately
 - Clinical equipment related to patient care must be calibrated and checked yearly by an outside BIO-MED company
 - Bio-Hazard waste must be stored according to the Federal rules and be picked up biweekly by a Medical Waste Management Company
- **Calculations** – NONE
- **Outputs**
 - Quality Assurance Clinic Monitor Form -- Completed
 - Quality Assurance Exam Room Checklist Form -- Completed
 - Emergency Cart Quality Assurance Record -- Updated
- **Post-conditions**
 - Patient and staff risks have been handled as per the policies and procedures in place

Figure 89: C As-Is P13.2 "Safety And Security Process Diagram"

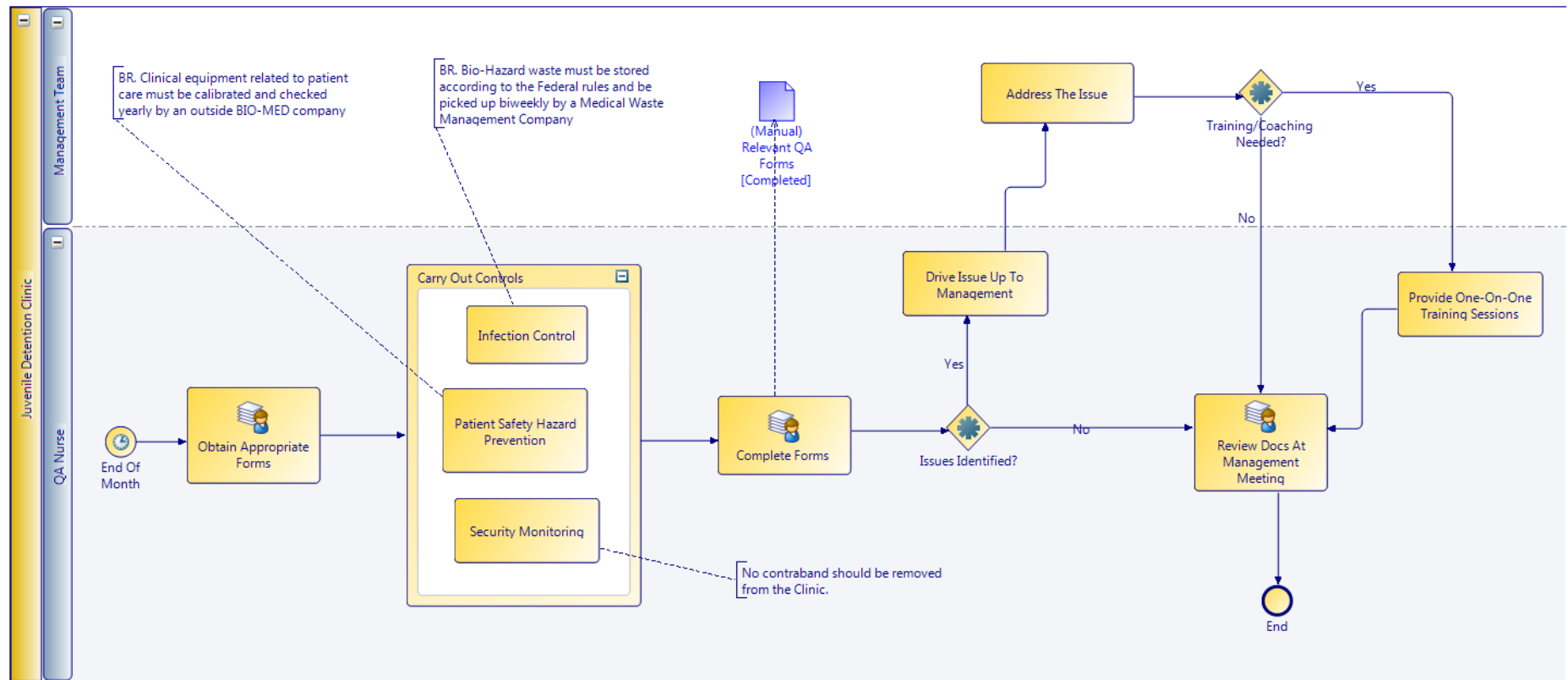
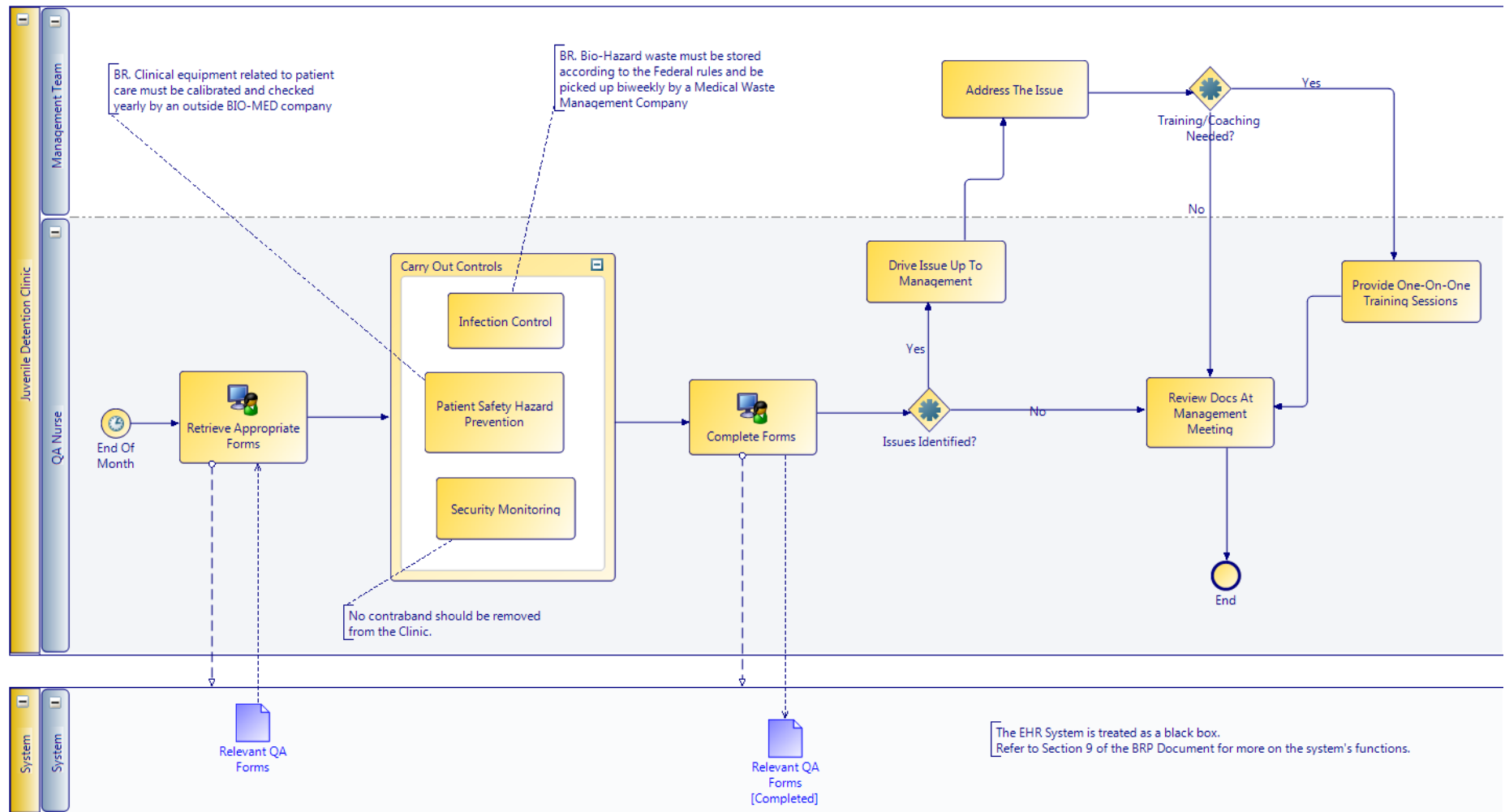


Figure 90: C To-Be P13.2 "Safety And Security Process Diagram"



9.13.3 C P13.3 – TRAINING

- **Triggering Events/Actions**
 - Beginning of year.
- **Involved Entities**
 - QA Nurse
 - Clinic Management Team
 - Medical Director
 - Nurse Clinic Manager
 - Clinic Staff
 - Administrative Assistant
 - MCJPD Education Department
- **Pre-conditions**– NONE
- **Inputs**
 - MCJPD Mandatory Training Requirements Sheet -- Completed
 - Training Modules -- Completed
- **Description**
 - During this process, training for the relevant Clinic personnel is completed in accordance with:
 - the MCJPD requirements
 - the Clinic Director's instructions
- **Business Rules**
 - Mandatory training must be completed yearly by all Clinic's staff.
- **Calculations** – NONE
- **Outputs**
 - Clinic's Education Schedule
- **Post-conditions**
 - Training-related documentation is ready for the yearly performance review by the Clinic Management Team.

Figure 91: C As-Is P13.3 "Training Process Diagram"

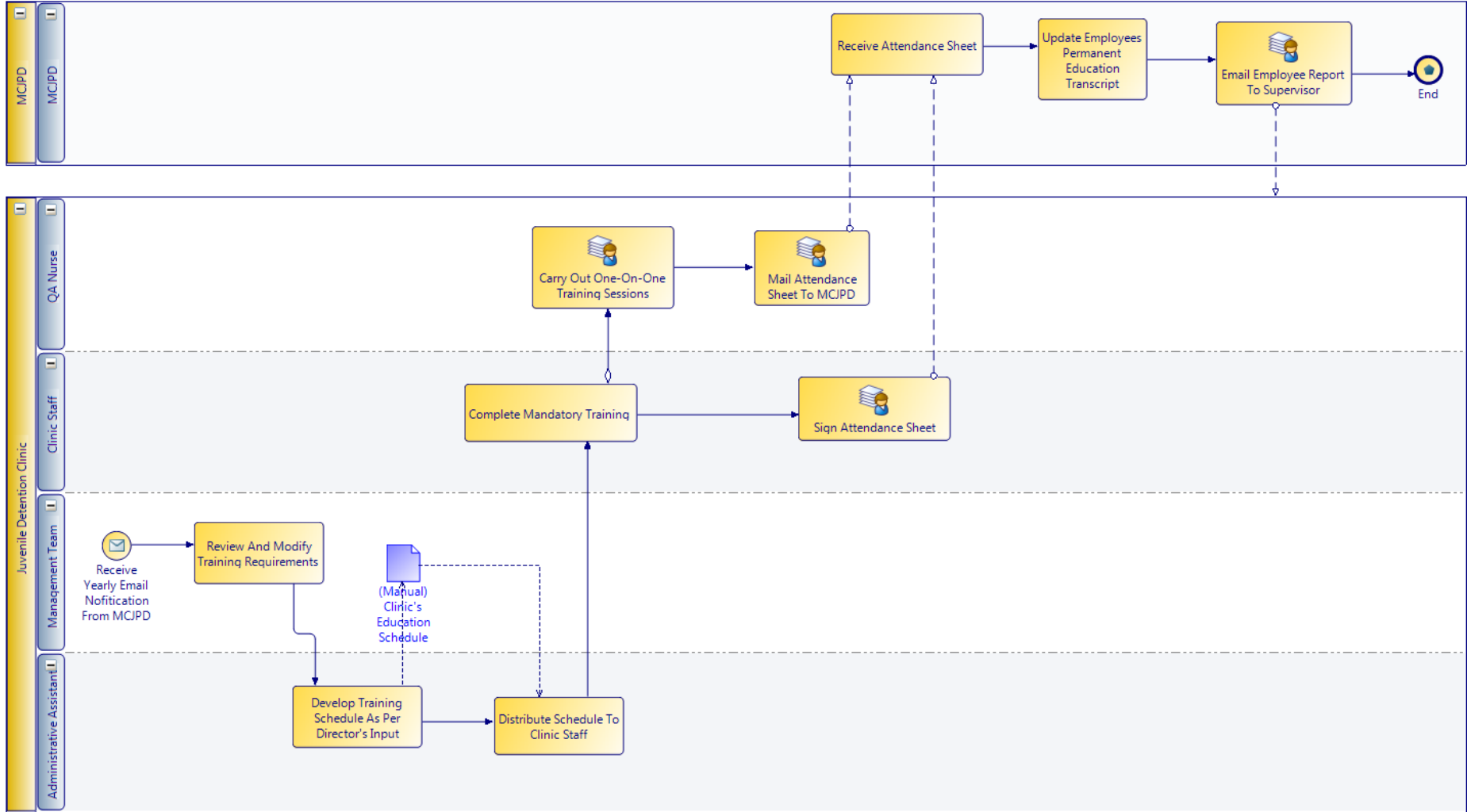
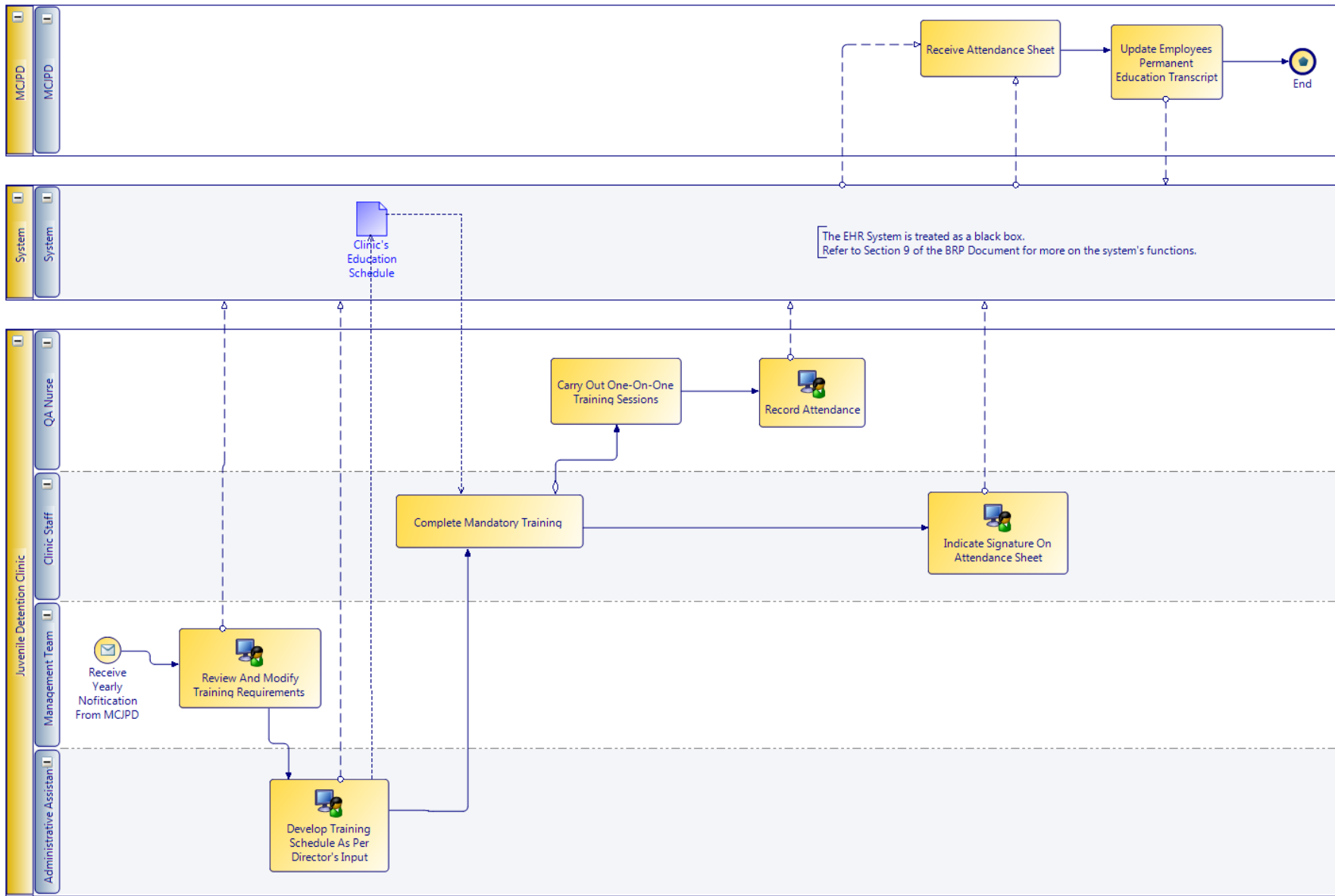


Figure 92: C To-Be P13.3 "Training Process Diagram"



10 BUSINESS PROCESSES – DETENTION COUNSELING AND PSYCHOLOGICAL SERVICES

There are ten (ten) major processes performed by the Juvenile Detention Medical Services Clinic. Those are:

- **Mental Health Screening(P1)**
- **Mental Health Counseling (P2)**
- **Therapeutic Group (P3)**
- **Mandated Reporting—CPS/Police (P4)**
- **DCPS Notes (P5)**
- **Crisis Session (P6)**
- **Suicide Prevention Intervention Training (P7)**
- **Court Ordered Evaluation (P8)**
- **Reports (P9)**

Currently, the bulk of the clinical operations are performed via the QuickDoc--a proprietary software used by the Counseling And Psychological Services Clinic.

The Courts' iCIS system is also leveraged for obtaining generic information on the Juvenile.

Figure 93 gives an overview of the 10 major processes listed above.

Sections 11.1 through 11.9 provide detail on each and every functional area listed above.

kkk

10.1 P P1 - MENTAL HEALTH SCREENING

- **Triggering Events/Actions**

- A referral, indicating that the Juvenile is experiencing crisis, or is in suicide watch, has been made to the DCPS Clinic from any of the following entities:
 - Medical Services Clinic
 - Probation Officer (PO)
 - JDAC
 - Juvenile Detention Officer (JDO)

- **Involved Entities**

- Juvenile
- DCPS Clinic Staff
- QuickDoc System
- iCIS
- Any other entities, not listed above and involved in any of the following sub-processes:
 - CPS Report
 - Court Ordered Evaluation

- **Pre-conditions**

- Juvenile is experiencing mental health crisis while in custody.

- **Inputs**

- Juvenile Active Chart
- iCIS MCI (Most Current Information) on the Juvenile
- iCIS IR Report
- MAYSI (Masachusetts Youth Screening Instrument) Report
- Limits Of Confidentiality And Treatment Procedure -- not-signed
- DCPS Clinic Intake Forms:
 - DCPS Mental Health Intake Screen -- Blank
 - DCPS Suicide Assessment Checklist--Blank
- Safety Plan--not-signed
- Depression And Suicide Screening Tools--Blank
- Right To Refusal Form--Blank
- Any other inputs, not listed above, pertaining to any of the following sub-processes:
 - CPS Report
 - Court Ordered Evaluation

- **Description**

- During this initial screening the Juvenile is evaluated for suicide risk
- The treatment goals are identified for the Juvenile
- All Juvenile pertinent information is appropriately entered into the QuickDoc system

- **Business Rules**

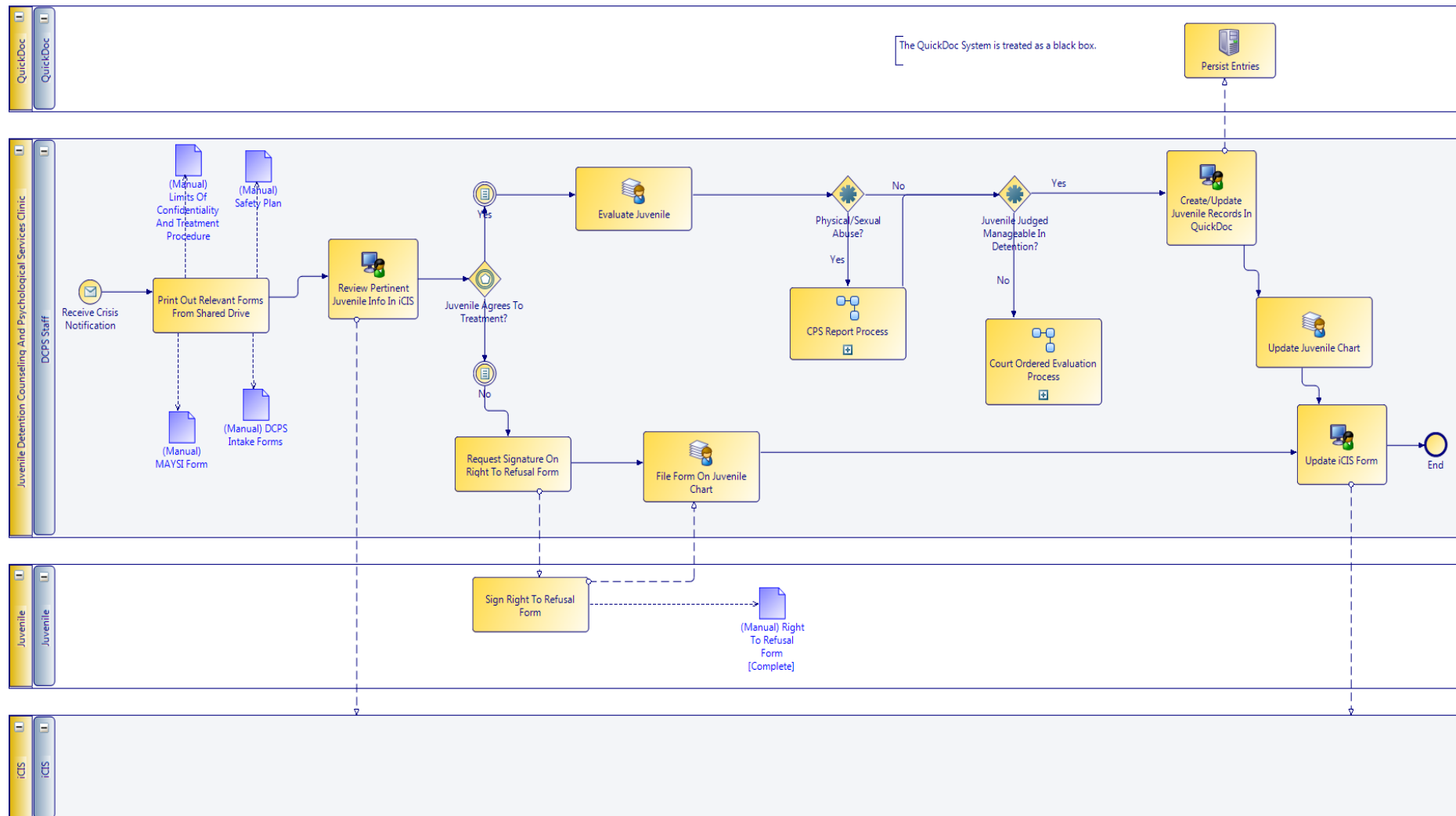
- Strict confidentiality of information is maintained at all times

- **Calculations – NONE**

- **Outputs**

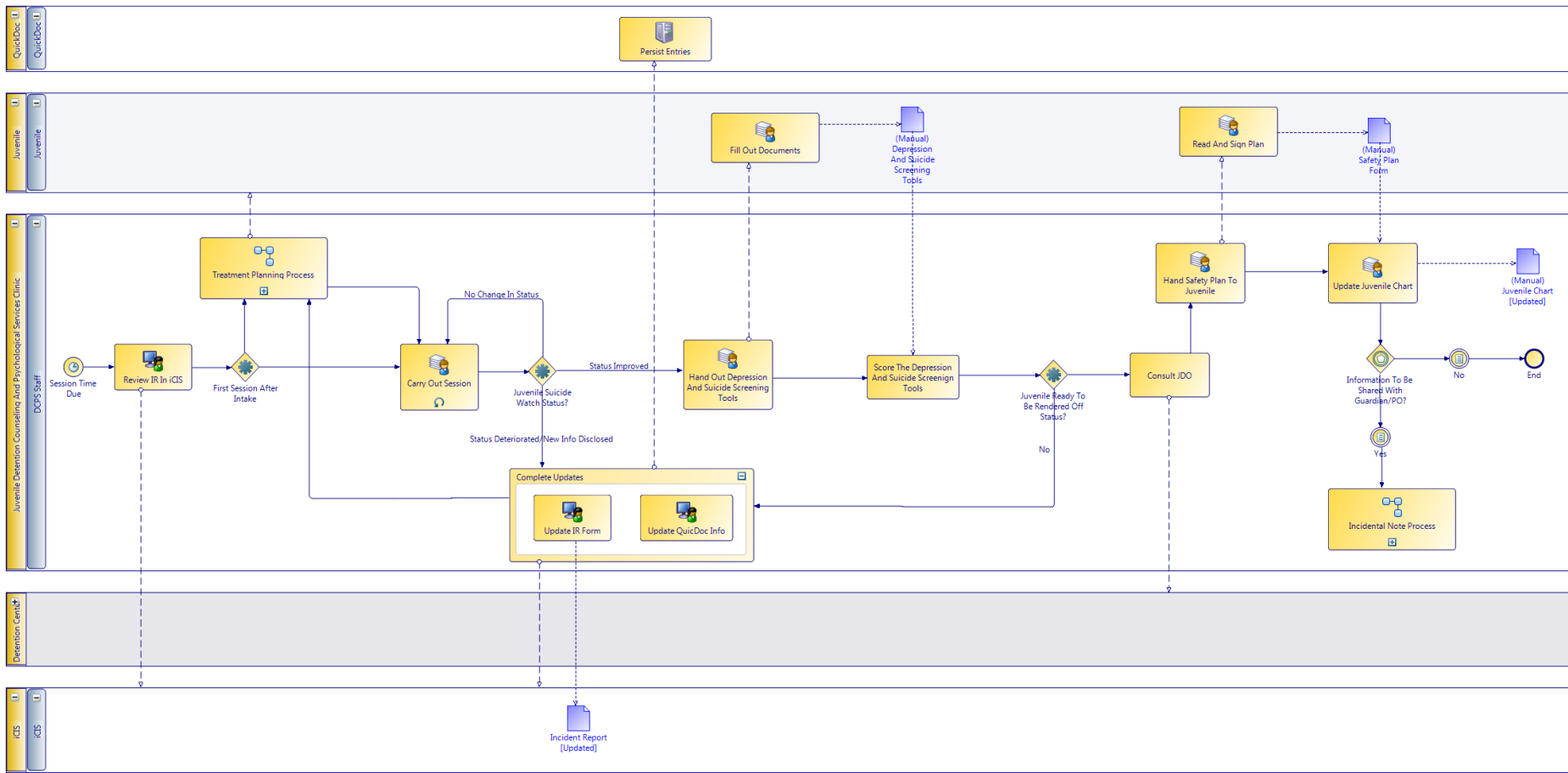
- Juvenile Active Chart--Updated
- iCIS IR Report--Updated
- Limits Of Confidentiality And Treatment Procedure -- Complete
- DCPS Clinic Intake Forms:
 - DCPS Mental Health Intake Screen -- Complete
 - DCPS Suicide Assessment Checklist--Complete
- Safety Plan--Complete
- Depression And Suicide Screening Tools--Complete
- Right To Refusal Form--Complete
- Juvenile Records in QuickDoc System--Created/Updated
- Any other outputs, not listed above, pertaining to any of the following sub-processes:
 - CPS Report
 - Court Ordered Evaluation
- **Post-conditions**
 - The suicide watch status for the Juvenile has been determined and recorded in iCIS
 - Additional mental services for the Juvenile (if needed) have been properly identified

Figure 93: P As-Is P1 "Mental Health Screening Process Diagram"



- **Triggering Events/Actions**
 - Counseling session time
- **Involved Entities**
 - Juvenile
 - DCPS Clinic Staff
 - QuickDoc System
 - iCIS
 - JDO
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Treatment Planning
 - Incidental Note
- **Pre-conditions**
 - Mental Health Screening process has been completed
- **Inputs**
 - Juvenile Active Chart
 - iCIS Incidental Report (IR)
 - Safety Plan—not signed
 - Depression And Suicide Screening Tools--Blank
 - Any other inputs, not listed above, pertaining to any of the following sub-processes:
 - Treatment Planning
 - Incidental Note
- **Description**
 - The Counselor works with the Juvenile on the goals identified in the Treatment Plan
 - For Juveniles who are ready to move to a better Suicide Watch status, the appropriate score is calculated based on the information obtained via the Screening Tools used by DCPS
 - All Juvenile pertinent information is appropriately entered into the QuickDoc system
- **Business Rules**
 - Strict confidentiality of information is maintained at all times.
- **Calculations – NONE**
- **Outputs**
 - Juvenile Active Chart--Updated
 - iCIS IR Report--Updated
 - Safety Plan--Complete
 - Depression And Suicide Screening Tools--Complete
 - Juvenile Records in QuickDoc System--Updated
 - Any other outputs, not listed above, pertaining to any of the following sub-processes:
 - Treatment Planning
 - Incidental Note
- **Post-conditions**
 - The mental health status of the Juvenile has been determined and recorded in iCIS/QuickDoc.

Figure 94: P As-Is P2 "Mental Health Counseling Process Diagram"



10.2.1 P P2.1 - TREATMENT PLANNING

To be added.

- **Triggering Events/Actions**
—
- **Involved Entities**
—
- **Pre-conditions**
—
- **Inputs**
—
- **Description**
—
- **Business Rules**
—
- **Calculations**
—
- **Outputs**
—
- **Post-conditions**

10.3 P P3 - THERAPEUTIC GROUP

- **Triggering Events/Actions**
 - DCPS offers group therapy session(s).
- **Involved Entities**
 - Juvenile
 - DCPS Clinic Staff
 - QuickDoc System
 - iCIS
 - JDO
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Crisis Session
- **Pre-conditions**
 - Juvenile is in custody, and willing to participate in group therapy session(s).
- **Inputs**
 - Juvenile Active Chart
 - Note Of Interest—Complete
 - Session Packet—Complete
 - Sign Up Sheet—not signed
 - Group Chart
 - Group Therapy Limits Of Confidentiality—Blank
 - Any other inputs, not listed above, pertaining to any of the following sub-processes:
 - Crisis Session
- **Description**
 - During this process, the Juveniles are working on a particular issue and skill under the guidance of a DCPS counselor.
- **Business Rules**
 - Strict confidentiality of information is maintained at all times
 - Confined Juvenile are not eligible for group sessions
 - A minimum of 3 (three) Juveniles must sign up for a group therapy session
- **Calculations – NONE**
- **Outputs**
 - Juvenile Active Chart—Updated
 - Group Chart—Updated
 - Sign Up Sheet—signed
 - Group Therapy Limits Of Confidentiality—Complete
 - Any other outputs, not listed above, pertaining to any of the following sub-processes:
 - Crisis Session
- **Post-conditions – NONE**

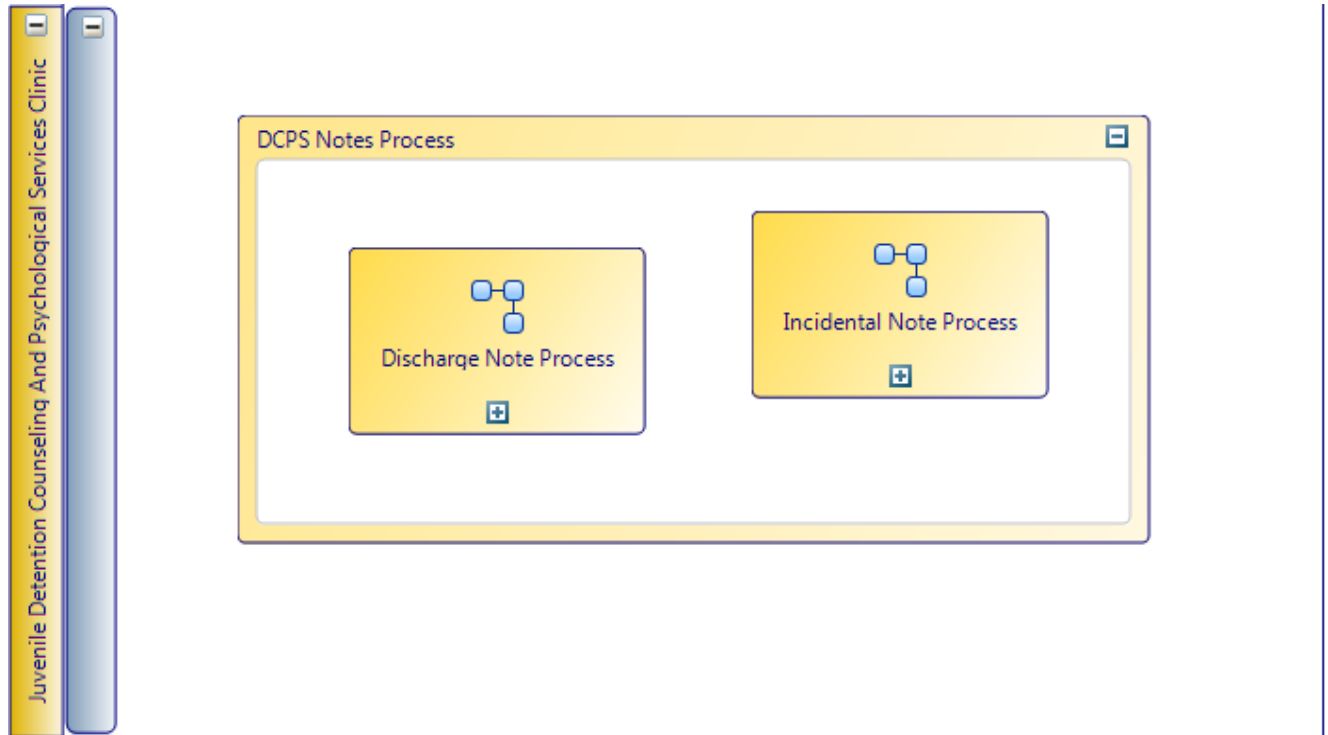
To be added

- **Triggering Events/Actions**
—
- **Involved Entities**
—
- **Pre-conditions**
—
- **Inputs**
—
- **Description**
—
- **Business Rules**
—
- **Calculations**
—
- **Outputs**
—
- **Post-conditions**

10.5 P P5 - DCPS NOTES

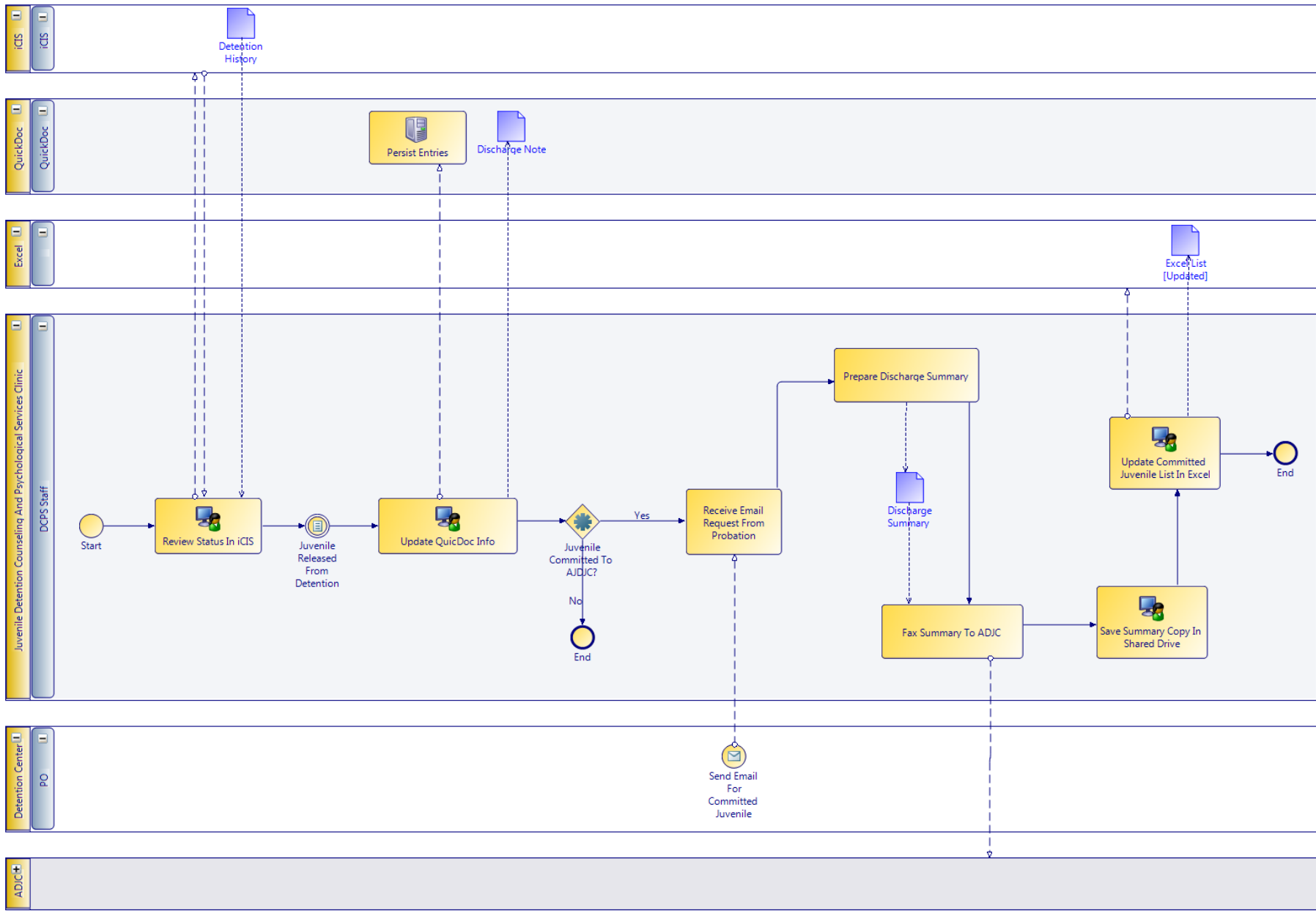
DCPS Notes include the Discharge Note process and the Incidental Note process. Descriptions of the services rendered during each of these processes are given in Sections 10.5.1 and 10.5.2.

Figure 96: P As-Is P5 "DCPS Notes Process Diagram"



- **Triggering Events/Actions**
 - Juvenile is released from detention
- **Involved Entities**
 - Juvenile
 - DCPS Clinic Staff
 - QuickDoc System
 - iCIS
 - Probation Officer
 - ADJC
 - Excel
- **Pre-conditions**
 - Juvenile should have had at least one previous contact with DCPS staff.
- **Inputs**
 - Juvenile Active Chart
 - iCIS Detention History
 - QuicDoc Information On Juvenile
 - Discharge Summary--Blank
 - Email Notification From Probation Department (for committed Juveniles)
 - Excel List Of Committed Juveniles
- **Description**
 - During this process the Juvenile is moved from active to inactive status in QuicDoc
 - The Discharge Summary is faxed to ADJC for committed Juveniles
- **Business Rules**
 - Strict confidentiality of information is maintained at all times
- **Calculations – NONE**
- **Outputs**
 - Juvenile Records in QuicDoc System--Updated
 - Discharge Summary--Completed
 - Excel List Of Committed Juveniles--Updated
- **Post-conditions**
 - Juvenile status has been updated in QuicDoc

Figure 97: P As-Is P5.1 "Discharge Note Process Diagram"



To be added

- **Triggering Events/Actions**

—

- **Involved Entities**

—

- **Pre-conditions**

—

- **Inputs**

—

- **Description**

—

- **Business Rules**

—

- **Calculations**

—

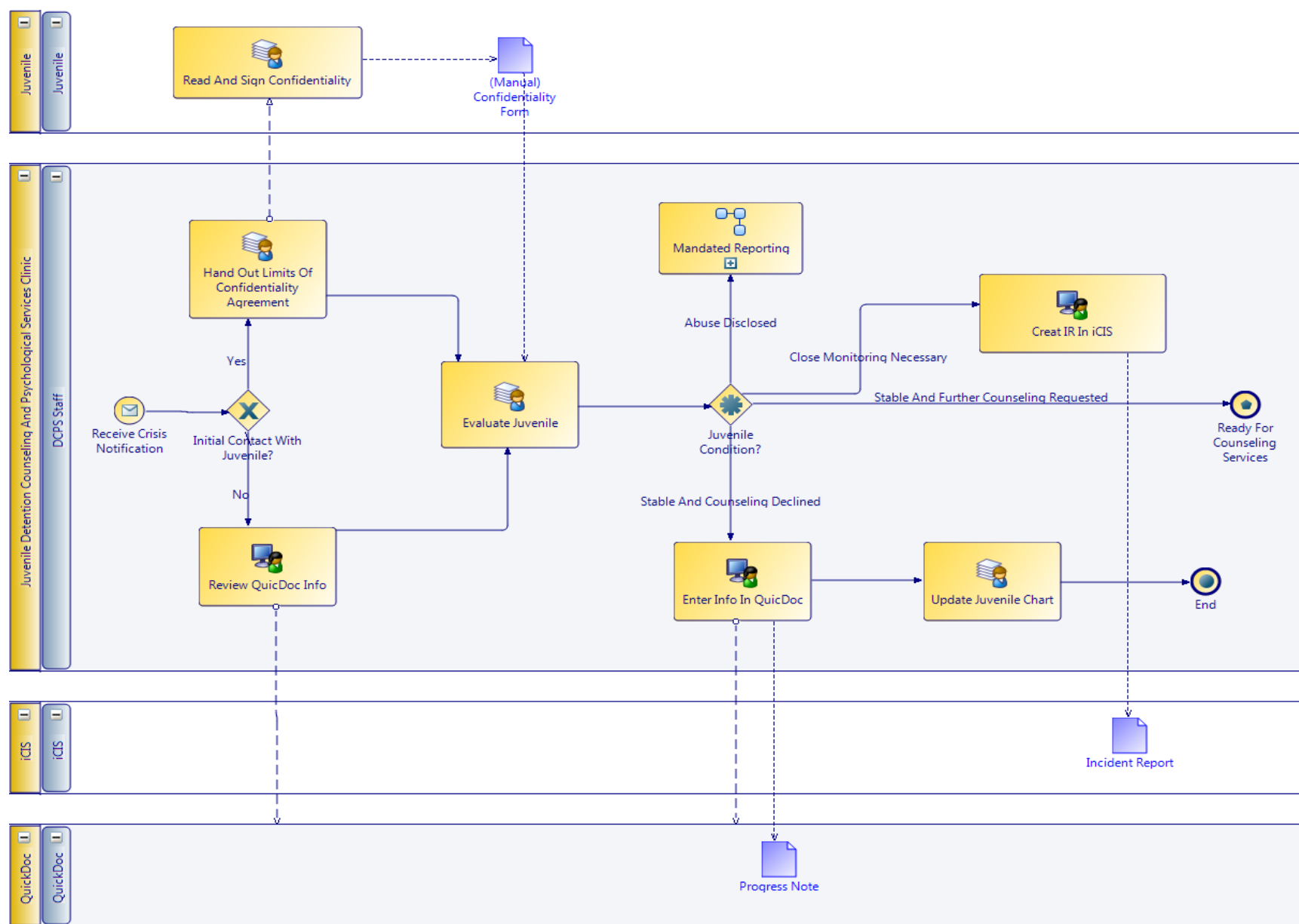
- **Outputs**

—

- **Post-conditions**

- **Triggering Events/Actions**
 - DCPS receives either a verbal, or email notification from either of the following:
 - Detention
 - Medical Clinic
 - Probation Officer
- **Involved Entities**
 - Juvenile
 - DCPS Clinic Staff
 - QuickDoc System
 - iCIS
- **Pre-conditions**
 - Juvenile is in custody and is experiencing mental crisis.
- **Inputs**
 - Juvenile Active Chart
 - DCPS Crisis/Immediate Risk Screen—Blank
 - Limits Of Confidentiality—Blank
 - Depression And Suicide Screening Tools--Blank
 - Any other inputs, not listed above, pertaining to any of the following sub-processes:
 - Incidental Note
- **Description**
 - This process represents an unplanned session which takes place when Juvenile who is experiencing a crisis, is being assessed for immediate risk by DCPS staff.
- **Business Rules**
 - Strict confidentiality of information is maintained at all times
- **Calculations – NONE**
- **Outputs**
 - Juvenile Active Chart—Updated
 - DCPS Crisis/Immediate Risk Screen—Complete
 - Limits Of Confidentiality—Signed
 - Juvenile Records in QuicDoc System—Updated
 - IR—Created in iCIS
- **Post-conditions**
 - Juvenile is stabilized mentally and Juvenile’s status has been changed and recorded in QuicDoc and (if necessary) in iCIS.

Figure 98: P As-Is P6 "Crisis Session Process Diagram"



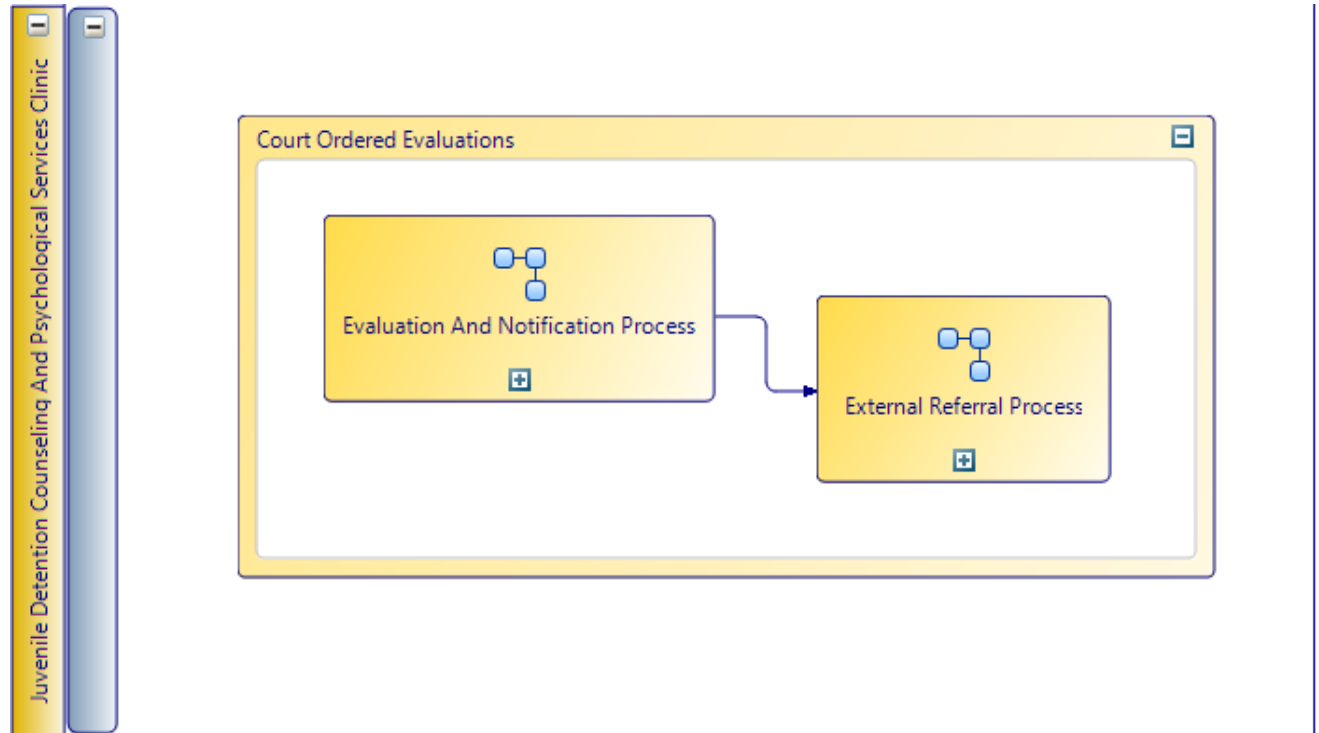
To be added.

- **Triggering Events/Actions**
—
- **Involved Entities**
—
- **Pre-conditions**
—
- **Inputs**
—
- **Description**
—
- **Business Rules**
—
- **Calculations**
—
- **Outputs**
—
- **Post-condition**

10.8 P P8 - COURT ORDERED EVALUATION

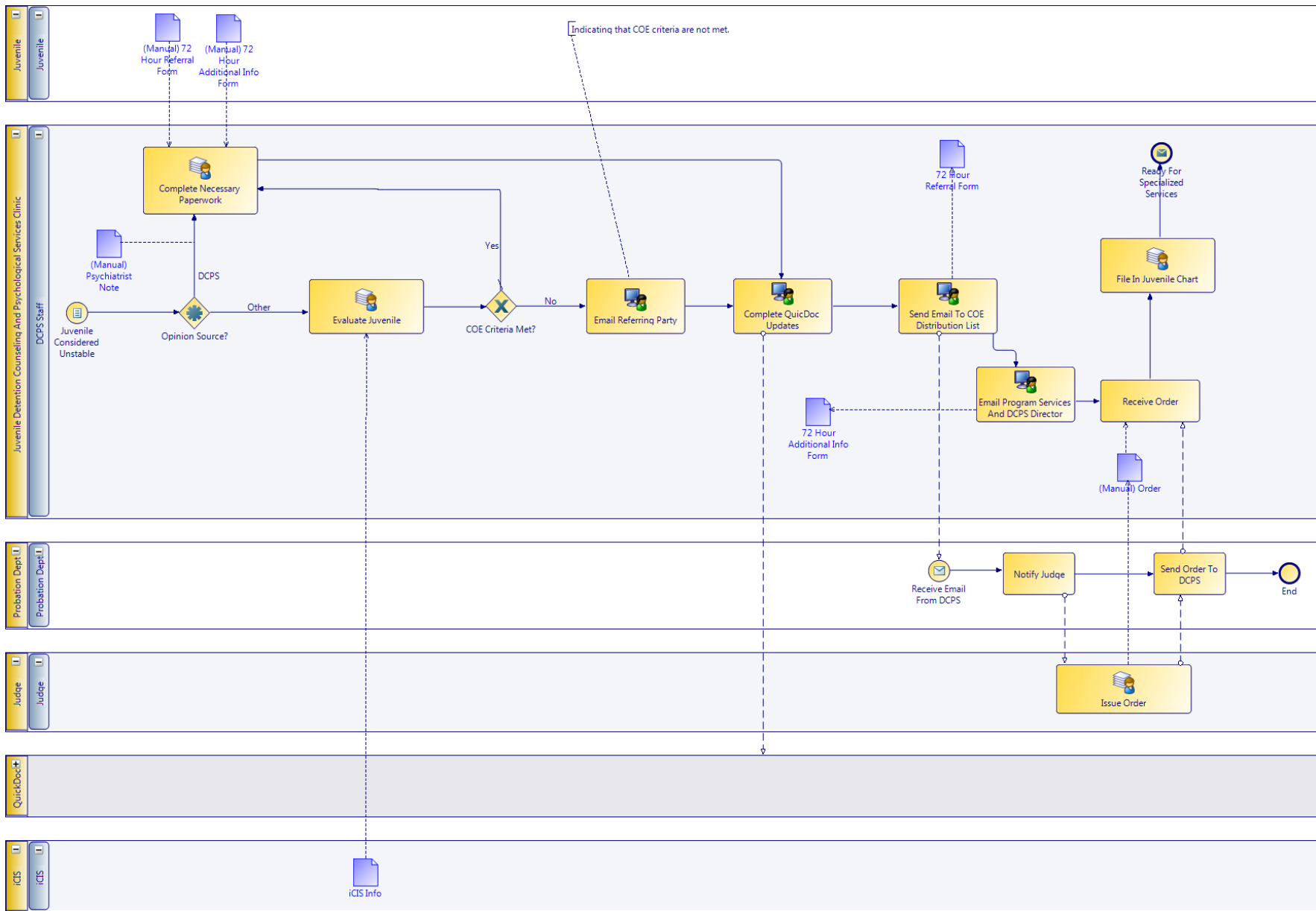
Court Ordered Evaluations occur when a Juvenile's manageability in detention is not completely safe and specialized services are considered necessary. The process is of the Evaluation and Notification process and the External Referral process. Descriptions of services rendered during each of these processes are given in Sections 10.8.1 and 10.8.2.

Figure 99 P As-Is P8 "Court Ordered Evaluation Process Diagram"



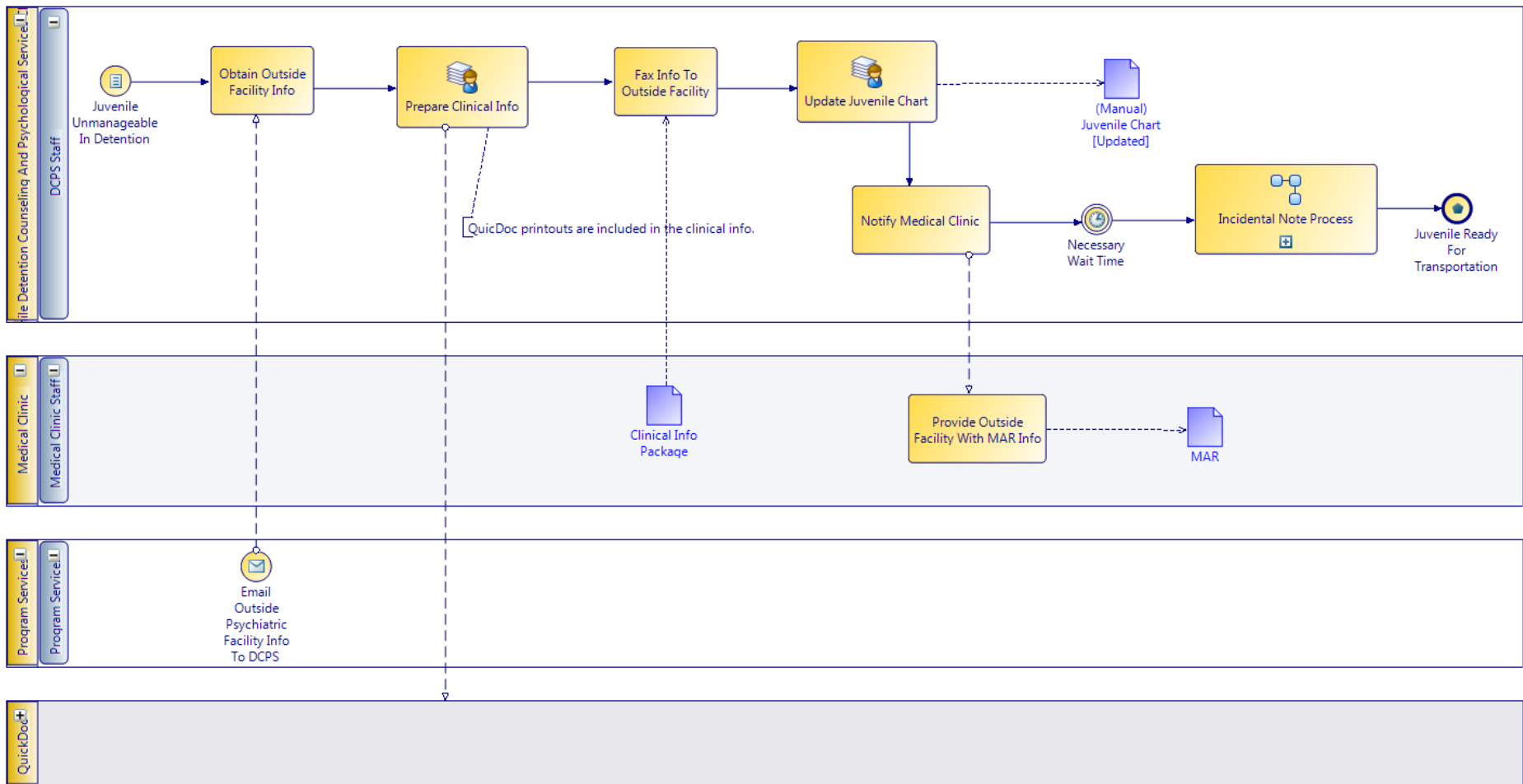
- **Triggering Events/Actions**
 - DCPS receives notification related to Juvenile’s instability from either of the following:
 - Detention
 - Medical Clinic
 - Judge
 - Probation Officer
 - Psychiatrist
- **Involved Entities**
 - Juvenile
 - DCPS Clinic Staff
 - Probation Department Programming Services
 - Probation Officer
 - Judge
 - QuickDoc System
 - iCIS
- **Pre-conditions**
 - Juvenile’s mental condition is suspected not to be managed safely in detention.
- **Inputs**
 - Juvenile Active Chart
 - 72 Hour Referral Form
 - 72 Hour Additional Information Form
 - Progress Note—Blank
 - Psychiatrist Note—Complete
 - Court Order—Complete (allowing Juvenile to leave detention)
 - DCPS COE Guidelines
- **Description**
 - The DCPS Counselor assesses concerns raised regarding Juvenile’s manageability in detention
 - Pertinent parties are notified and the relevant information is exchanged
 - Relevant entries related to COE cases are made into an Excel spreadsheet
- **Business Rules**
 - Strict confidentiality of information is maintained at all times
- **Calculations – NONE**
- **Outputs**
 - Juvenile Active Chart--Updated
 - 72 Hour Referral Form—Complete
 - 72 Hour Additional Information Form—Complete
 - Progress Note—Complete
 - Excel List—Updated
- **Post-conditions**
 - Juvenile is ready for specialized outside services.

Figure 100: P As-Is P8.1 "Evaluation And Notification Process Diagram"



- **Triggering Events/Actions**
 - Juvenile’s unmanageability in detention is confirmed by DCPS
- **Involved Entities**
 - DCPS Clinic Staff
 - QuickDoc System
 - Program Services
 - Outside Psychiatric Facility
 - Any other entities, not listed above and involved in any of the following sub-processes:
 - Incidental Note
- **Pre-conditions**
 - The Evaluation and Notification process has been completed.
- **Inputs**
 - Email Request From Program Services
 - Clinical Information Package including:
 - Psychiatrist Note
 - DCPS Note
 - Any other inputs, not listed above, pertaining to any of the following sub-processes:
 - Incidental Note
- **Description**
 - During this process the clinical information is shared with the outside Psychiatric Facility.
- **Business Rules**
 - Strict confidentiality of information is maintained at all times
- **Calculations – NONE**
- **Outputs**
 - Juvenile Active Chart--Updated
 - MAR—Updated
 - Any other outputs, not listed above, pertaining to any of the following sub-processes:
 - Incidental Note
- **Post-conditions**
 - Juvenile is ready for transport to outside Psychiatric Facility

Figure 101: P As-Is P8.2 "External Referral Process Diagram"



11 REQUIREMENTS

| # | Requirement | Optional/ Mandatory | Comments |
|-----|--|------------------------|----------|
| 1. | All juvenile information access restrictions are enforced pursuant to Arizona Revised Statute, Judicial Branch Rules of the Court, and Administrative Orders | M | |
| 2. | All medical Health Insurance Portability and Accountability Act (HIPAA) regulations are enforced | M | |
| 3. | Ability to enter all necessary information currently utilizing paper forms via online screens/pages | M | |
| 4 | Access to all clinic forms online | M | |
| 5. | Access to Nursing Assessment online | M | |
| 6. | Provider Assessment Forms | M | |
| 7 | Electronic Authorization/Signature <ul style="list-style-type: none"> The nurses will sign off on coworker's orders and providers will sign off on nursing orders and provider orders. Unit secretary will sign off on all orders. Authorized external sources will sign off on all relevant forms. | M | |
| 8. | Ability to electronically submit prescriptions | M | |
| 9. | Ability to electronically submit lab requests to external suppliers | | |
| 10. | Lab results and outside medical records will be entered into the electronic system. | M | |
| 11. | Ability to capture images of documents, pictures, etc. | M | |
| 12. | Ability to enter Healthcare Request via computer and alert for Sick Call | M | |
| 13. | Ability to create custom reports for: <ul style="list-style-type: none"> Statistical Reporting, Patient History, and Audit & Control Requirements | M | |
| 14. | Ability to create custom, online forms for entry and display of information | M | |

| # | Requirement | Optional/ Mandatory | Comments |
|-----|--|------------------------|---|
| 15. | Ability to utilize secure communication capabilities to communicate with various people, including: <ul style="list-style-type: none"> • Probation Officers, • Other Clinical Staff, • Other Detention Staff, • Approved external sources. | M | |
| 16. | Ability to identify: <ul style="list-style-type: none"> • The Juvenile to whom medicine is to be administered, • The medicine due for the Juvenile | M | Added per Dr. B. on 09/30 |
| 17. | Ability to meet the 'Meaningful Use' Regulation for Electronic Health Records, as specified by the Federal Government. | M | Added per Maggie on 10/05 Refer to Appendix 13.3 for details on Meaningful Use Requirements. |
| 18. | Ability use the EHR system as the focal access point from which the Clinic users would interface with any other external software systems that they need to retrieve from and/or send to data/information. | M | Added after discussion with Bill on 10/13. |
| 19. | Ability to maintain the inventory for each and every medicine used by the Clinic. | M | Added on 10/28. tbd further with Dr. B. |
| 20. | Ability to store the data related to clinical staff training (mandatory and non-mandatory). | M | Added on 10/28. tbd further with Dr. B. |
| 21. | Ability to either replicate the functionality of QuicDoc system currently in use by the DCPS Unit, or to allow the DCPS Unit to utilize the existing QuicDoc functionality without retiring the QuicDoc system. | M | Added per Dr. M. on 11/02. |

12 APPENDIXES

12.1 GLOSSARY

| Term | Definition |
|-----------------|--|
| ADJC | Arizona Department of Juvenile Correction |
| Court Personnel | All employees and/or other individuals with legal and assigned authorization to access case information. |
| CHCRF | Health Care Request Form |
| CHS | Correctional Health Services |
| CPF | Community Placement Facility |
| CPT | Current Procedural Terminology |
| CTS | Court Technology Services |
| CWWS | Court Wide Web System |
| DCPS | Detention Counseling and Psychological Services |
| EHR | Electronic Health Records – an application system that provides for the electronic storage and retrieval of patient’s medical profiles and history along with diagnostic data and results. |
| HIPAA | The Health Insurance Portability and Accountability Act (HIPAA) is a federal law that dictates the control and access of individual’s medical information. |
| HUC | Health Unit Coordinator (Clinic’s Secretary) |
| ICQ | Insurance Coverage Questionnaire |
| JHT | Juvenile Health Technician |

| | |
|-----------------|---|
| Juvenile | Any individual under the age of 18 or under the control of the Juvenile Probation and/or Detention organizations. |
| MAR | Medication Administration Record |
| MCJPD | Maricopa County Juvenile Probation Department |
| MMC | Maricopa Medical Center |
| PHI | Protected Health Information |
| PO | Probation Officer |
| Provider | A Nurse Practitioner or Medical Doctor employed by the Medical Services Clinic. |
| RN | Registered Nurse |
| SOAP | Subjective Objective Assessment Plan |
| SPS | Suicide Probability Scale |
| STI | Sexually Transmitted Infection |
| TST | Tuberculin Skin Test |

12.2 REFERENCES

- Existing forms and logs.
- Nursing Assessments Guidelines – Maricopa County Juvenile Probation Health Services
- Operation Guideline – Section: II B1-11 (Juvenile Health Services)
- Juvenile Chart, which consists of
 - Nurse Intake Form
 - Health Appraisal Form
 - Physical Exam Form
 - Physician Orders
 - Physician Notes
 - Nurse Notes
 - Data Base Physical
 - Laboratory
 - X-ray
 - Correspondence
 - Authorization to Release Medical Information
 - Communication Log
 - Other Correspondence
 - Immunization
 - Medication
 - Medication Log (MAR)
- U.S. Department of Health & Human Services website—for information on the Meaningful Use Requirements:
http://www.cms.gov/EHRIncentivePrograms/35_Meaningful_Use.asp#TopOfPage
- Tibco Business Studio model, which can be found in the shared drive at:
M:\Court Technology Services\PMO\Projects\Juvenile Detention Clinic - EHR Project\Tibco_Model
Diagrams can be accessed via: File/Switch Workspace/Other/ [browse to the path above]
- Earlier versions of the BPR document, which can be found in the shared drive at:
M:\Court Technology Services\PMO\Projects\Juvenile Detention Clinic - EHR Project\PID - BPR\BRP Version History Folder

12.3 THE "MEANINGFUL USE" REGULATION FOR ELECTRONIC HEALTH RECORDS

1. Record patient demographics (sex, race, ethnicity, date of birth, preferred language, and in the case of hospitals, date and preliminary cause in the event of death)
2. Record vital signs and chart changes (Height, weight, blood pressure, body-mass index, growth charts for children)
3. Maintain up-to-date problems list of current and active diagnoses.
4. Maintain active medication list.
5. Maintain active medication allergy list.
6. Record smoking status for patients 13 years of age or older.
7. For individual professionals, provide patients with clinical summaries for each office visits; for hospitals, provide an electronic copy of hospital discharge instructions on request.
8. On request, provide patients with an electronic copy of their health information (including diagnostic-test results, problem list, medication lists, medication allergies, and for hospitals, discharge summary and procedures)
9. Generate and transmit permissible prescriptions electronically (does not apply to hospitals)
10. Computer provider order entry (CPOE) for medication orders.
11. Implement drug-drug and drug- allergy interactions checks.
12. Implement capability to electrically exchange key clinical information among providers and patient – authorized entities.
13. Implement one clinical decision support rule and ability to track compliance with the rule.
14. Implement systems to protect privacy and security of patient data in the EHR
15. Report clinical quality measures to CMS or states
16. Implements drug formulary checks
17. Incorporate clinical laboratory test results into EHRs as structured data
18. Generate lists of patients by specific conditions to use for quality improvement, reduction of disparities, research, or outreach
19. Use EHR technology to identify patient-specific education resources and provide those to the patient as appropriate
20. Perform medication reconciliation between care settings
21. Provide summary of care record for patients referred or transitioned to another provider or setting
22. Submit electronic immunization data to immunization registries or immunization information systems
23. Submit electronic syndromic surveillance data to public health agencies
24. Submit electronic data on reportable laboratory results to public health agencies
25. Send reminders to patients (per patient preference) for preventive and follow-up care.
26. Provide patients with timely electronic access to their health information (including laboratory results, problem list, medication list, medication allergies)

12.4 ISSUES FOR FOLLOW UP

1. The Forms used by both clinics will be available upon request during the design phase of the project.
2. Business processes at a finer level of detail than the ones listed and described in this document, might have to be identified during the design phase.
3. Four business processes of the DCPS Clinic business (identified, but not detailed in this document) might need to be covered at a later time.
4. The to-be process flow diagrams for the DCPS clinic would have to be created after a decision has been made on the high level requirement 21.